

Technical Assistance Webinar to Support State Reporting of the Child, Adult, and Health Home Core Sets: FFY 2023 Updates and Reporting Resources

April 12, 2023

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Technical Instructions

- All participants are muted upon entry.
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- The meeting will be recorded and posted on Medicaid.gov after the webinar.
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Objectives

- Review major updates to the 2023 Child, Adult, and Health Home Core Sets
- Summarize key changes to technical specifications
- Discuss stratification categories for FFY 2023 reporting
- Discuss use of alternate data sources for FFY 2023 Core Set reporting
- Describe FFY 2023 data quality priorities
- Share technical assistance resources available to states
- Preview timeline for FFY 2023 reporting



FFY 2023 Child, Adult, and Health Home Core Set Updates



Updates to the FFY 2023 Child, Adult, and Health Home Core Sets

Core Set(s)	Measures Added for FFY 2023
Child	 Avoidance of Antibiotic Treatment for Acute Bronchitis/Bronchioloitis: Ages 3 Months to 17 Years (AAB-CH) Lead Screening in Children (LSC-CH)
Adult	Long-Term Services and Supports Comprehensive Care Plan and Update (CPU-AD)
Health Home	No new measures
	Measures Retired for FFY 2023
Child	No retired measures
Adult	
Health Home	

Updates to the FFY 2023 Child and Adult Core Sets were announced in a November 2022 CMCS Informational Bulletin, available at https://www.medicaid.gov/federal-policy-guidance/downloads/cib111522.pdf. Updates to the FFY 2023 Health Home Core Set were announced in an email distributed to state-level health home contacts in December 2022.



New Child Core Set Measure: Avoidance of Antibiotic Treatment for Acute Bronchitis/Bronchiolitis: Ages 3 Months to 17 Years (AAB-CH)

Description	Percentage of episodes for beneficiaries ages 3 months to 17 years with a diagnosis of acute bronchitis/bronchiolitis that did not result in an antibiotic dispensing event.
Measure Steward	National Committee for Quality Assurance (NCQA)
Data Source	Administrative
Denominator	Episodes for beneficiaries ages 3 months to 17 years as of the Episode Date who had an outpatient, telephone, e-visit or virtual check-in, an observation visit, or emergency department visit with a diagnosis of acute bronchitis/bronchiolitis during the intake period.
Numerator	Dispensed prescription for an antibiotic medication on or three days after the Episode Date.
Calculation	The measure is calculated as an inverted rate [1 – (numerator/eligible population)]. A higher rate indicates appropriate acute bronchitis/bronchiolitis treatment (i.e., the percentage of episodes that did not result in an antibiotic dispensing event). The rate should be multiplied by 100 and reported as a percentage.

^{*} The Avoidance of Antibiotic Treatment for Acute Bronchitis/Bronchiolitis (AAB-AD) was added to the Adult Core Set for FFY 2022 for adults age 18 and older.



New Child Core Set Measure: Lead Screening in Children (LSC-CH)

Description	Percentage of children 2 years of age who had one or more capillary or venous lead blood test for lead poisoning by their second birthday
Measure Steward	National Committee for Quality Assurance (NCQA)
Data Sources	Administrative, Hybrid
Denominator	Children who turn 2 years old during the measurement year.
Numerator	At least one lead capillary or venous blood lead test on or before the child's second birthday.



New Adult Core Set Measure: Long-Term Services and Supports Comprehensive Care Plan and Update (CPU-AD)

Description	Percentage of beneficiaries receiving long-term services and supports (LTSS) services age 18 and older who have documentation of a comprehensive long-term services and supports (LTSS) care plan in a specified time frame that includes core elements. The following rates are reported: • Care Plan with Core Elements Documented. Beneficiaries who had a comprehensive LTSS care plan with 9 core elements documented within 120 days of enrollment (for new beneficiaries) or during the measurement year (for established beneficiaries). • Care Plan with Supplemental Elements Documented. Beneficiaries who had a comprehensive LTSS care plan with 9 core elements and at least 4 supplemental elements documented within 120 days of enrollment (for new beneficiaries) or during the measurement year (for established beneficiaries).
Measure Steward	National Committee for Quality Assurance (NCQA)



New Adult Core Set Measure: Long-Term Services and Supports Comprehensive Care Plan and Update (CPU-AD) (continued)

Data Source	Case management record review
Denominator	This measure is based on review of LTSS case management records drawn from a sample of the eligible beneficiaries age 18 and older as of December 31 of the measurement year
Numerators	Numerator 1: Care Plan with Core Elements Documented New beneficiaries who had: A comprehensive LTSS care plan completed within 120 days of enrollment, with 9 core elements documented. If the comprehensive care plan is developed as part of the process to determine eligibility for the LTSS benefit and occurs within 30 days prior to the enrollment start date, it may be counted toward the measure if the care plan meets the rest of the numerator criteria. OR Established beneficiaries who had: A comprehensive LTSS care plan completed during the measurement year, with 9 core elements documented.



New Adult Core Set Measure: Long-Term Services and Supports Comprehensive Care Plan and Update (CPU-AD) (continued)

Numerators (continued)

Numerator 2: Care Plan with Supplemental Elements Documented New beneficiaries who had: A comprehensive LTSS care plan completed within 120 days of enrollment, with 9 core elements and at least 4 supplemental elements documented. If the comprehensive care plan is developed as part of the process to determine eligibility for the LTSS benefit and occurs within 30 days prior to the enrollment start date, it may be counted toward the measure if the care plan meets the rest of the numerator criteria.

OR

Established beneficiaries who had: A comprehensive LTSS care plan created during the measurement year.



New Resource Available

- Coming soon! Calculating the Long-Term Services and Supports Comprehensive Care Plan and Update (CPU) Measure in the 2023 Adult Core Set.
- The TA resource will be available at https://www.medicaid.gov/medicaid/quality-of-care/performance-measurement/adult-and-child-health-care-quality-measures/adult-core-set-reporting-resources/index.html.



Summary of Key FFY 2023 Measure Specification Updates



Summary of Updates for FFY 2023

- This section highlights key changes made by measure stewards to FFY 2023 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.
 - Health Home Core Set: https://www.medicaid.gov/state-resource
 -center/medicaid-state-technical-assistance/downloads/hh-change-summary-2023.pdf.



Cross-cutting Measure Specification Updates

- Clarified that beneficiaries in hospice or using hospice services anytime during the measurement year are a required exclusion. This guidance applies to the following HEDIS measures:
 - AAB-CH/AD, ADD-CH, AMB-CH/HH, AMM-AD, AMR-CH/AD, APM-CH, APP-CH, BCS-AD, CBP-AD/HH, CCS-AD, CHL-CH/AD, CIS-CH, COL-AD/HH, FUA-CH/AD/HH, FUH-CH/AD/HH, FUM-CH/AD/HH, IMA-CH, HBD-AD, HPCMI-AD, IET-AD/HH, LSC-CH, PCR-AD/HH, PPC-CH/AD, SAA-AD, SSD-AD, W30-CH, WCC-CH, and WCV-CH.
 - For a list of measure acronyms, see Appendix A.



Measure-specific Updates: Controlling High Blood Pressure (CBP-AD/HH)

- Updated the numerator description to clarify that blood pressure (BP) readings taken in an acute inpatient setting or during an emergency department visit should be excluded.
- Clarified in the numerator of the Hybrid Specification:
 - BP readings taken by the beneficiary are eligible for use in reporting.
 - Ranges and thresholds do not meet criteria.
 - A BP documented as an "average BP" (e.g., "average BP: 139/70")
 is eligible for use.



Measure-specific Updates: Contraceptive Care Measures (CCP-CH/AD, CCW-CH/AD)

For both measures:

- Updated the exclusion category time period for women who had a live birth from last 2 months of the measurement year to last 3 months.
- Added additional notes on the use of stratification by race and ethnicity to help illuminate disparities in contraceptive provision.

For CCP-CH/AD:

- Revised the 60-day postpartum rate to be a 90-day postpartum rate.
- Clarified that the measure is episode-based.

For CCW-CH/AD:

 Clarified that the measure is person-based and calculated so that every person in the measure is counted once.



Measure-specific Updates: Colorectal Cancer Screening (COL-AD/HH)

- Revised the age range from ages 50 to 75 to ages 45 to 75.
 - Clarified that the measure applies to beneficiaries ages 46 to 75 to account for the lookback period.
 - For the purpose of Core Set reporting, states should calculate and report this measure for three age groups (as applicable): ages 46 to 49, ages 50 to 64, and ages 65 to 75.
- Changed references of "FIT-DNA test" to "stool DNA (sDNA) with FIT test" in the numerator.



Measure-specific Updates: Follow-up After Emergency Department Visit for Substance Use (FUA-CH/AD/HH)

- Revised measure name from "Follow-Up After Emergency Department Visit for Alcohol and Other Drug Abuse or Dependence" to "Follow-Up After Emergency Department Visit for Substance Use."
- Revised terminology from "alcohol or other drug abuse or dependence (AOD)" to "substance use disorder (SUD)" throughout.
- Added a pharmacy benefit requirement for the eligible population.
- Added ED visits with a diagnosis of unintentional and undetermined drug overdose to the denominator.
- Revised and restructured the numerator logic and value sets.



Measure-specific Updates: Hemoglobin A1c Control for Patients with Diabetes (HBD-AD)

- Revised the measure name from "Comprehensive Diabetes Care: Hemoglobin A1c (HbA1c) Poor Control (>9.0%)" to "Hemoglobin A1c Control for Patients with Diabetes."
- For the 2023 Adult Core Set, the Comprehensive Diabetes
 Care: Hemoglobin A1c (HbA1c) Poor Control (>9.0%) (HPC-AD) measure was modified by the measure steward into a
 combined measure that has two rates: HbA1c Control (<8.0%)
 and HbA1c Poor Control (>9.0%).
- Revised the optional exclusions for polycystic ovarian syndrome, gestation diabetes, or steroid-induced diabetes to be required exclusions.



Measure-specific Updates: HIV Viral Load Suppression (HVL-AD)

- Clarified that states may use administrative data sources (Medicaid claims data and HIV surveillance data) or EHR data to calculate the measure.
- Clarified that the eligible population and denominator population are the same and provided additional guidance on identifying the eligible/denominator population.
- Updated the Eligible Population/Denominator language to clarify the beneficiary must meet all three criteria:
 - Age 18 and older.
 - Diagnosis of HIV prior to the start of the measurement year or within the first 90 days of the measurement year.
 - At least one medical visit must occur in the first 240 days of the measurement year.
- Updated tables and added additional codes for identifying the numerator.



Measure-specific Updates: Initiation and Engagement of Substance Use Disorder Treatment (IET-AD/HH)

- Revised the measure name from "Initiation and Engagement of Alcohol and Other Drug Abuse or Dependence Treatment" to "Initiation and Engagement of Substance Use Disorder Treatment."
- Replaced "alcohol and other drug (AOD)" references with "substance use disorder (SUD)."
- Changed the start of the Intake Period to November 15 of the year prior to the measurement year.
- Changed from a beneficiary-based measure to a SUD-diagnosis episode-based measure.
- Revised the negative diagnosis history from 60 days to 194 days.
- Added a Negative Medication History to the denominator.
- Revised the Continuous Enrollment criteria from 108 days to 242 days.
- Revised the numerator criteria for Initiation of SUD Treatment and Engagement of SUD Treatment.
- Clarified the Total rates are the sum of the SUD diagnosis cohort stratifications.



Stratification Categories for FFY 2023 Core Set Reporting



Stratification Considerations

- CMCS encourages states to stratify Core Set data by subpopulations.
 - Aggregate quality measure data can mask important differences across subpopulations.
 - Stratifying quality measure data can help focus state quality improvement initiatives and priorities.
- In the Quality Measure Reporting (QMR) system, states have the option to report stratified rates for one or more categories for each Core Set measure.
- For FFY 2023, the optional stratification section in the QMR system will have the following updates:
 - Include Missing or Not Reported categories for all stratification categories.
 - Remove Primary Language, Disability Status, and Adult Eligibility Group (ACA Expansion Group) categories.



QMR Stratification Categories for FFY 2023 Reporting: Race

Race:

- 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
- Add Another Race
- Missing or Not Reported

^{*} 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).



QMR Stratification Categories for FFY 2023 Reporting: Ethnicity

Ethnicity:

- 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
- Add Another Ethnicity
- Missing or Not Reported



^{*} 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).

QMR Stratification Categories for FFY 2023 Reporting: Sex

- Sex:
 - Male
 - Female
 - Add Another Sex
 - Missing or Not Reported



QMR Stratification Categories for FFY 2023 Reporting: Geography

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



Use of Alternate Data Sources for FFY 2023 Core Set Reporting



Alternate Data Source: LBW-CH and LRCD-CH

- To reduce state burden and streamline reporting, CMCS will continue to calculate the Live Births Weighing Less than 2,500 Grams (LBW-CH) and Low-Risk Cesarean Delivery (LRCD-CH) measures for all states for FFY 2023 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).
- CMCS will send states a preview of the FFY 2023 LBW-CH and LRCD-CH measures in spring 2024, which will be calculated using calendar year 2022 natality data.



Alternate Data Source: NCIDDS-AD

- The National Core Indicators (NCI®) Intellectual and Developmental Disabilities (NCI-IDD®) provide information on beneficiaries' experience and self-reported outcomes of longterm 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 CMCS for the purpose of FFY 2023 Adult Core Set reporting.
- CMCS will send states a preview of the NCI data for FFY 2023 Core Set reporting in spring 2024.



Alternate Data Source: CPC-CH, CPA-AD, FVA-AD, and MSC-AD

- The Center for Medicaid and CHIP Services (CMCS) is collaborating with the Agency for Healthcare Research and Quality (AHRQ) to use data from the CAHPS Health Plan Survey Database to streamline reporting of the CPC-CH, CPA-AD, FVA-AD, and MSC-AD measures.
- All Medicaid and CHIP state agencies and health plans are encouraged to submit CAHPS Health Plan Survey data to the 2023 CAHPS Database between June 5 and June 30, 2023. This includes surveys administered between July 1, 2022, and June 30, 2023. These data correspond to the FFY 2023 Core Set reporting cycle.
- CMCS plans to use data from the CAHPS Database for public reporting of Core Set measures in future reporting years.
- States and plans that submit their data to the CAHPS Database will receive a private, customized feedback report showing their CAHPS survey results compared to overall results in the Database.
- For more information on the CAHPS Database, please visit
 https://www.ahrq.gov/cahps/cahps-database/index.html or contact us at MAC-CAHPS-TA@mathematica-mpr.com.



FFY 2023 Data Quality Priorities



Data Quality Considerations

- Overview of data quality considerations for FFY 2023
 Core Set 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-ofcare/downloads/child-adult-healthhomes-data-quality-checklist.pdf



FFY 2023 Data Quality Priorities

 Alignment between measures included in the Child, Adult, and Health Home Core Sets.



- Ensure that cross-cutting measures are calculated using consistent methodology.
- Ensure that cross-cutting measures are reported for all applicable Core Sets.
- Documentation of any deviations from the Core Set specifications, including age groups, data sources, and methods.



FFY 2023 Data Quality Priorities (continued)

- Documentation of which populations and services are excluded from the measures:
 - Programs (Medicaid, 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 federallyqualified health centers, rural health clinics, or Indian Health Service facilities)
- If your state did not include some measure-eligible populations, please describe the missing population and the size of the excluded population.



FFY 2023 Data Quality Priorities: Tips for Text Fields

- The QMR system included text fields that are combined into "state-specific comments (SSC)," which accompany state rates in public reporting (including the Scorecard for applicable measures).
- Information in the following text fields are included in SSCs:
 - Data source descriptions
 - Descriptions of other populations and excluded populations
 - Deviations
 - Additional notes/comments on measure
 - Other delivery systems
- 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



Resources for FFY 2023 Child Core Set Reporting

Resource	Medicaid.gov Link
FFY 2023 Core Set Resource Pages	https://www.medicaid.gov/medicaid/quality-of-care/quality-of-care- performance-measurement/adult-and-child-health-care-quality- measures/child-core-set-reporting-resources/index.html
FFY 2023 Core Set Measure List	https://www.medicaid.gov/medicaid/quality-of-care/downloads/2023-child-core-set.pdf
FFY 2023 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 FFY 2023	https://www.medicaid.gov/medicaid/quality-of-care/downloads/child-coreset-updates.pdf
FFY 2023 Data Quality Checklist	https://www.medicaid.gov/medicaid/quality-of-care/downloads/child-adult-healthhomes-data-quality-checklist.pdf
FFY 2023 Measurement Period Table	https://www.medicaid.gov/medicaid/quality-of-care/downloads/ffy-2023-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 FFY 2023 Adult Core Set Reporting

Resource	Medicaid.gov Link
FFY 2023 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
FFY 2023 Core Set Measure List	https://www.medicaid.gov/medicaid/quality-of-care/downloads/2023-adult-core-set.pdf
FFY 2023 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 FFY 2023	https://www.medicaid.gov/medicaid/quality-of-care/downloads/adult-coreset-updates.pdf
FFY 2023 Data Quality Checklist	https://www.medicaid.gov/medicaid/quality-of-care/downloads/child-adult-healthhomes-data-quality-checklist.pdf
FFY 2023 Measurement Period Table	https://www.medicaid.gov/medicaid/quality-of-care/downloads/ffy-2023-adult-core-set-measurement-periods.pdf

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Resources for FFY 2023 Health Home Core Set Reporting

Resource	Medicaid.gov Link
FFY 2023 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
FFY 2023 Core Set Measure List	https://www.medicaid.gov/medicaid/quality-of-care/downloads/2023- health-home-core-set.pdf
FFY 2023 Resource Manual and Technical Specifications*	https://www.medicaid.gov/state-resource-center/medicaid-state-technical-assistance/downloads/FFY-2023-HH-Core-Set-Manual.pdf?t=1681737304
Summary of updates to the resource manual and technical specifications for FFY 2023	https://www.medicaid.gov/state-resource-center/medicaid-state-technical-assistance/downloads/hh-change-summary-2023.pdf
FFY 2023 Data Quality Checklist	https://www.medicaid.gov/medicaid/quality-of-care/downloads/child-adult-healthhomes-data-quality-checklist.pdf
FFY 2023 Measurement Period Table	https://www.medicaid.gov/state-resource-center/medicaid-state-technical-assistance/downloads/hh-core-set-measurement-period-table-2023.pdf
FFY 2023 Health Home Expected Reporting Table	https://www.medicaid.gov/state-resource-center/medicaid-state-technical-assistance/downloads/health-home-reporting-table.pdf

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Additional Resources for FFY 2023 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 2023 Child, Adult, and Health Home Core Set Measure Specifications (https://www.medicaid.gov/medicaid/quality-of-care/downloads/telehealth-ta-resource.pdf)	
AIF-HH	Updated: Calculating the Admission to a Facility from the Community (AIF-HH) Measure in the Health Home Core Set (https://www.medicaid.gov/state-resource-center/downloads/2023-aif-hh -core-set.pdf)	
CBP-AD/HH	Updated: Calculating the Controlling High Blood Pressure (CBP) Measure in the 2023 Adult and Health Home Core Sets (https://www.medicaid.gov/medicaid/quality-of-care/downloads/CBP-Fact-Sheet.pdf)	
COB-AD, FUA- CH/AD/HH, IET-AD/HH, OHD-AD, OUD-AD/HH	Updated: Overview of Substance Use Disorder Measures in the 2023 Child, Adult, and Health Home Core Sets (https://www.medicaid.gov/medicaid/quality-of-care/downloads/performance-measurement/factsheet-sud-adult-core-set.pdf)	
PCR-AD/HH	Updated: Calculating the Plan All-Cause Readmissions (PCR) Measure in the 2023 Adult and Health Home Core Sets (https://www.medicaid.gov/medicaid/quality-of-care/downloads/pcr-ta-resource.pdf)	
CCP-CH/AD, CCW-CH/AD	Updated: SAS code for calculating contraceptive care measures (https://www.hhs.gov/opa/performance-measures/claims-data-sas-program-instructions/index.html)	
CPU-AD	Coming soon: Calculating the Long-Term Services and Supports Comprehensive Care Plan and Update (CPU-AD) Measure in the 2023 Adult Core Set	



Additional Resources for FFY 2023 Child, Adult, and Health Home Core Set Reporting (continued)

Measure(s)	Resource
PQI01-AD, PQI05-AD, PQI08-AD, PQI15-AD, PQI92-HH	Free software for calculating the PQI measures (http://www.qualityindicators.ahrq.gov/Software/Default.aspx) 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)
SFM-CH	Updated: Calculating the Sealant Receipt on Permanent First Molars Measure in the Child Core Set (https://www.medicaid.gov/quality-of-care/downloads/sfm-ta-resource.pdf) Sample SAS code is available on request by emailing the TA mailbox at MACQualityTA@cms.hhs.gov.
COL-AD/HH	Updated: Calculating the Colorectal Cancer Screening Measure in the 2023 Adult and Health Home Core Sets (https://www.medicaid.gov/quality-of-care/downloads/COL-ta-resource.pdf)
OEV-CH, SFM-CH, TFL-CH	Updated: Overview of the Dental and Oral Health Services Measures in the 2023 Child Core Set https://www.medicaid.gov/quality-of-care/downloads/dentaloralhealth-ta-resource.pdf)



Technical Assistance (TA) for FFY 2023 Core Set Reporting

- For TA related to calculating, reporting, or using the Core Set measures, submit your questions to the TA mailbox at <u>MACQualityTA@cms.hhs.gov</u>.
- For one-on-one TA on using immunization registry data as a supplemental data source for CIS-CH and IMA-CH measures, contact <u>MACQualityTA@cms.hhs.gov</u>.



Timeline for FFY 2023 Reporting

- CMCS will open reporting for the Child, Adult, and Health Home Core Sets for FFY 2023 reporting in Fall 2023.
- CMCS anticipates that Core Set reporting for FFY 2023 will close by December 31, 2023.
- CMCS will host a training webinar in the fall when the QMR system opens for FFY 2023 reporting.



Q&A

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



Thank you for attending the webinar!



Appendix A: 2023 Core Set Measure Lists



2023 Child Core Set Measures

Measure Name	Measure Steward	Data Collection Method	
Primary Care Access and Preventive 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, or EHRa	
Well-Child Visits in the First 30 Months of Life (W30-CH)	NCQA	Administrative	
Immunizations for Adolescents (IMA-CH)	NCQA	Administrative or hybrid ^a	
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	
Maternal and Perinatal Health	•	·	
Live Births Weighing Less Than 2,500 Grams (LBW-CH)	CDC/NCHS	State vital records	
Prenatal and Postpartum Care: Timeliness of Prenatal Care (PPC-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 (LRCD-CH)	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	
Ambulatory Care: Emergency Department (ED) Visits (AMB-CH)	NCQA	Administrative	



2023 Child Core Set Measures (continued)

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	Administrative or EHR ^a	
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	Administrative ^a	
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	
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	



2023 Child Core Set Measures (continued)

More information on Updates to the 2023 and 2024 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 settings. Domains are intended to categorize measure topic areas and are not intended to define the health care setting in which care is provided.

- * This measure was added to the 2023 Child Core Set.
- ^a The Childhood Immunization Status, Immunizations for Adolescents, Follow-Up Care for Children Prescribed Attention-Deficit/Hyperactivity Disorder (ADHD) Medication, and Metabolic Monitoring for Children and Adolescents on Antipsychotics measures are also specified for Electronic Clinical Data System (ECDS) reporting for HEDIS. ECDS specifications are not currently available for Child Core Set reporting.

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); 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.



2023 Adult Core Set Measures

Measure Name	Measure Steward	Data Collection Method
Primary Care Access and Preventive Care		·
Cervical Cancer Screening (CCS-AD)	NCQA	Administrative, hybrid, or EHR
Chlamydia Screening in Women Ages 21 to 24 (CHL-AD)	NCQA	Administrative or EHR
Colorectal Cancer Screening (COL-AD)	NCQA	Administrative or EHR ^a
Flu Vaccinations for Adults Ages 18 to 64 (FVA-AD)	NCQA	Survey
Breast Cancer Screening (BCS-AD)	NCQA	Administrative or EHR ^a
Maternal and Perinatal Health		·
Prenatal and Postpartum Care: Postpartum Care (PPC-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
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
Hemoglobin A1c Control for Patients With Diabetes (HBD-AD)*	NCQA	Administrative, hybrid, or EHR
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



2023 Adult Core Set Measures (continued)

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: Hemoglobin A1c (HbA1c) Poor Control (>9.0%) (HPCMI-AD)	NCQA	Administrative or hybrid
Use of Pharmacotherapy for Opioid Use Disorder (OUD-AD)	CMS	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
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 (NCIDDS-AD)	NASDDDS/ HSRI	Survey



2023 Adult Core Set Measures (continued)

More information on Updates to the 2023 and 2024 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 settings. Domains are intended to categorize measure topic areas and are not intended to define the health care setting in which care is provided.

- * The Comprehensive Diabetes Care: Hemoglobin A1c (HbA1c) Poor Control (>9.0%) (HPC-AD) measure was modified by the measure steward into a combined measure that has two rates: HbA1C Control (<8%) and HbA1C Poor Control (>9%). The combined measure is called Hemoglobin A1c Control for Patients With Diabetes (HBD-AD).
- ** This measure was added to the 2023 Adult Core Set.
- ^a The Colorectal Cancer Screening and Breast Cancer Screening measures are also specified for Electronic Clinical Data System (ECDS) reporting for HEDIS. ECDS specifications are not currently available for Adult Core Set reporting.

AHRQ = Agency for Healthcare Research & Quality; CMS = Centers for Medicare & Medicaid Services; 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.



2023 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	Administrative or EHR ^a	
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)	CMS	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	
Prevention Quality Indicator (PQI) 92: Chronic Conditions Composite (PQI92-HH)	AHRQ	Administrative	
Utilization Measures			
Admission to a Facility from the Community (AIF-HH)	CMS	Administrative	
Ambulatory Care: Emergency Department (ED) Visits (AMB-HH)	NCQA	Administrative	
Inpatient Utilization (IU-HH)	CMS	Administrative	

More information on updates to the 2023 and 2024 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/2023-health-home-core-set-history-table.pdf.

AHRQ = Agency for Healthcare Research & Quality; CMS = Centers for Medicare & Medicaid Services; EHR = Electronic Health Record; NCQA = National Committee for Quality Assurance.



^a The Colorectal Cancer Screening measure is also specified for Electronic Clinical Data System (ECDS) reporting for HEDIS. ECDS specifications are not currently available for Health Home Core Set reporting.