
CMCS Informational Bulletin

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SUBJECT: 2020 Updates to the Child and Adult Core Health Care Quality Measurement Sets

This informational bulletin describes the 2020 updates to the Core Set of children's health care quality measures for Medicaid and the Children's Health Insurance Program (CHIP) (the Child Core Set) and the Core Set of health care quality measures for adults enrolled in Medicaid (the Adult Core Set).

Background

The Center for Medicaid & CHIP Services (CMCS) has worked with stakeholders to identify two Core Sets of health care quality measures that can be used to assess the quality of health care provided to children and adults enrolled in Medicaid and CHIP (see <https://www.medicaid.gov/medicaid/quality-of-care/performance-measurement/index.html>).

The Core Sets are tools states can use to monitor and improve the quality of health care provided to Medicaid and CHIP beneficiaries. CMCS released the initial Child Core Set in 2010 and the initial Adult Core Set in January 2012. Currently, by statute, state reporting on these measure sets is voluntary.^{1, 2} Since the inception of the Child and Adult Core Sets, CMCS has collaborated with state Medicaid and CHIP agencies to voluntarily collect, report, and use the core set measures to drive quality improvement. The goals for the reporting of the Child and Adult Core Set are to encourage national reporting by states on a uniform set of measures and to support states in using these measures to drive quality improvement. Reporting of the Child Core Set and the Behavioral Health measures on the Adult Core Set will become mandatory starting in 2024.^{3, 4} CMCS will provide further guidance to states regarding mandatory Core Set reporting in future years. Core Set reporting is also important because the State Health System Performance pillar of the Medicaid and CHIP (MAC) Scorecard uses Core Set data for several measures.

¹https://www.ssa.gov/OP_Home/ssact/title11/1139A.htm.

²https://www.ssa.gov/OP_Home/ssact/title11/1139B.htm

³ Advancing Chronic Care, Extenders and Social Services (ACCESS) Act (P.L. 115-123 Sec. 50102)
<https://www.congress.gov/115/bills/hr1892/BILLS-115hr1892enr.xml>

⁴ The Substance Use-Disorder Prevention that Promotes Opioid Recovery and Treatment for Patients and Communities Act (SUPPORT for Patients and Communities Act) <https://www.congress.gov/115/bills/hr6/BILLS-115hr6enr.pdf>

Part of implementing an effective quality measures reporting program is to periodically reassess the measures that comprise it since many factors, such as changes in clinical guidelines and experiences with reporting and performance rates, may warrant modifying the measure set. Section 1139A of the Social Security Act, as amended by Section 401(a) of the Children’s Health Insurance Reauthorization Act (CHIPRA) of 2009, provides that, beginning annually in January 2013, the Secretary shall publish recommended changes to the core measures.⁵ Section 1139B of the Social Security Act, as amended by Section 2701 of the Affordable Care Act, provides that the Secretary shall issue updates to the Adult Core Set beginning in January 2014 and annually thereafter.⁶ In fulfilling these statutory requirements, CMCS works with other federal partners to promote quality measurement alignment across programs in order to reduce burden and help to drive quality improvement across payers and programs.

For the 2020 updates to the Child and Adult Core Sets, CMCS contracted with Mathematica to convene the 2020 Child and Adult Core Set Annual Review Stakeholder Workgroup (Workgroup) to identify ways to improve the Core Sets.⁷ The Workgroup included 28 members representing a diverse set of stakeholders, including state Medicaid and CHIP representatives, health care providers, health plans, patient advocates, and federal partners who review measures for potential use in federal public reporting. CMCS also obtained additional input from state Medicaid agencies through the Quality Technical Advisory Group (QTAG), internal Center for Medicare and Medicaid Services (CMS) stakeholder meetings, and interagency federal partners to ensure that the Core Set measures are evidence-based and promote measure alignment within CMS and across the federal government.

⁵ The first update was issued via a State Health Official Letter “2013 Children’s Core Set of Health Care Quality Measures,” SHO #13-002. <http://www.medicaid.gov/Federal-Policy-Guidance/downloads/SHO-13-002.pdf> . The 2014 update was issued via a CMCS Informational Bulletin “2014 Updates to the Child and Adult Core Health Care Quality Measurement Sets” <http://medicaid.gov/Federal-Policy-Guidance/Downloads/CIB-12-19-13.pdf> as was the “2015 Updates to the Child and Adult Health Care Quality Measurements Sets” <http://www.medicaid.gov/federal-policy-guidance/downloads/cib-12-30-2014.pdf>, “2016 Updates to the Child and Adult Core Health Care Quality Measurement Sets” <https://www.medicaid.gov/federal-policy-guidance/downloads/cib-12-11-15.pdf>, “2017 Updates to the Child and Adult Core Health Care Quality Measures Sets” <https://www.medicaid.gov/federal-policy-guidance/downloads/cib120516.pdf> and the “2018 Updates to the Child and Adult Core Health Care Quality Measurement Sets” <https://www.medicaid.gov/federal-policy-guidance/downloads/cib111417.pdf>. The 2019 update was issued via a CMCS Informational Bulletin “2019 Updates to the Child and Adult Core Health Care Quality Measurement Sets.” <https://www.medicaid.gov/federal-policy-guidance/downloads/cib112018.pdf>

⁶ The first update was issued via a CMCS Informational Bulletin “2014 Updates to the Child and Adult Core Health Care Quality Measurement Sets.” <http://medicaid.gov/Federal-Policy-Guidance/Downloads/CIB-12-19-13.pdf> . The 2015 update was issued via a CMCS Informational Bulletin “2015 Updates to the Child and Adult Core Health Care Quality Measurement Sets.” <http://www.medicaid.gov/federal-policy-guidance/downloads/cib-12-30-2014.pdf>. The 2016 update was issued via a CMCS Information Bulletin “2016 Updates to the Child and Adult Core Health Care Quality Measurement Sets.” <https://www.medicaid.gov/federal-policy-guidance/downloads/cib-12-11-15.pdf>. The 2017 update was issued via a CMCS Information Bulletin “2017 Updates to the Child and Adult Core Health Care Quality Measurement Sets.” <https://www.medicaid.gov/federal-policy-guidance/downloads/cib120516.pdf>. The 2018 update was issued via a CMCS Information Bulletin “2018 Updates to the Child and Adult Core Health Care Quality Measurement Sets.” <https://www.medicaid.gov/federal-policy-guidance/downloads/cib111417.pdf>. The 2019 update was issued via a CMCS Informational Bulletin “2019 Updates to the Child and Adult Core Health Care Quality Measurement Sets.” <https://www.medicaid.gov/federal-policy-guidance/downloads/cib112018.pdf>

⁷ <https://www.mathematica-mpr.com/features/maccoresetreview>

Since the Child and Adult Core Sets were established in 2010 and 2012, respectively, states have made significant progress in reporting on them. All states and the District of Columbia (DC) voluntarily reported at least one Child Core Set measure for FFY 2018, with 43 states reporting at least half (13) of the measures. States reported a median of 18 Child Core Set measures for FFY 2018, which was consistent with the median for FFY 2016 and FFY 2017. Twenty-one states reported more Child Core Set measures for FFY 2018 than for FFY 2017. The number of states reporting Adult Core Set measures has increased steadily from 30 states for FFY 2013 to 45 states for FFY 2018. The median number of Adult Core Set measures reported by states is 20 measures for FFY 2018, up from 17 measures reported for FFY 2017; thirty-two states reported at least half (16) of the Adult Core Set measures for FFY 2018. In addition, 36 states reported more Adult Core Set measures for FFY 2018 than for FFY 2017.

2020 Child Core Set

For the 2020 Child Core Set, CMCS will retire three measures from the Child Core Set:

- Use of Multiple Concurrent Antipsychotics in Children and Adolescents (APC-CH) because this measure is being retired by the measure steward.^{8,9}
- Children and Adolescents' Access to Primary Care Practitioners (CAP-CH) because this measure is more of a utilization measure than a quality measure with high rates for most age ranges resulting in a limited ability for states to take action on the results.¹⁰
- Pediatric Central Line–Associated Bloodstream Infections (CLABSI-CH) (NQF#0139) because this measure is reported by hospitals directly to the Centers for Disease Control and Prevention (CDC) and therefore state Medicaid programs have had limited ability to take action on the results.¹¹

For the 2020 Child Core Set update CMCS will add one new measure: Metabolic Monitoring for Children and Adolescents on Antipsychotics (NQF#2800). This measure assesses the percentage of children and adolescents ages 1 to 17 who had at least two antipsychotic medication dispensing events of the same or different medication and had monitoring for the development of abnormal cholesterol and blood sugar levels, which are known side effects of these medications.¹²

CMCS will also modify an existing measure: Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents—Body Mass Index (BMI) Assessment for Children/Adolescents (WCC-CH) (NQF#0024). To the existing BMI measure, CMCS will add the following other two components of this measure: counseling for nutrition, and counseling for physical activity.¹³

⁸ The measure steward refers to the organization that is responsible for providing the required measure information for the measure maintenance process that occurs approximately every three years and is responsible for making the necessary updates to the measure and for informing NQF about any changes that are made to the measure on an annual basis.

⁹ Measure Steward: National Committee for Quality Assurance, not NQF endorsed

¹⁰ Measure Steward: National Committee for Quality Assurance, not NQF endorsed

¹¹ Measure Steward: Centers for Disease Control and Prevention, [NQF#0139](#)

¹² Measure Steward: National Committee for Quality Assurance, [NQF#2800](#)

¹³ Measure Steward: National Committee for Quality Assurance, [NQF#0024](#)

The addition of these measures will allow CMCS and states to expand the measurement of quality of care for children enrolled in Medicaid and CHIP in two areas: (1) behavioral health/physical health integration and (2) prevention. The Metabolic Monitoring for Children and Adolescents on Antipsychotics measure will replace the APC-CH measure, which is being retired by the measure steward. This new measure will help states monitor children on antipsychotics (including those children previously identified by the APC-CH measure) by identifying any gaps in their metabolic follow-up. The addition of the two counseling items for the WCC-CH measure will shift this measure from being a purely administrative measure that documents whether a child's BMI was recorded to a more meaningful process measure that assesses the extent to which health care providers take action on those BMI results to address obesity. This will result in an improved ability for states to take action to improve performance and quality of health care in this area.

Additional information about the Child and Adult Core Set Annual Review process that took place in 2019 and the recommendations to CMCS can be found at:

<https://www.medicaid.gov/medicaid/quality-of-care/performance-measurement/child-core-set/index.html>.

2020 Adult Core Set

For the 2020 Adult Core Set, CMCS will retire two measures from the Adult Core Set.

- Comprehensive Diabetes Care: Hemoglobin A1c (HbA1c) Testing (HA1C-AD) (NQF#0057) because there is another publicly reported diabetes measure on the Adult Core Set, Comprehensive Diabetes Care: Hemoglobin A1c (HbA1c) Poor Control (>9 percent) (HPC-AD), which is an outcomes measure that also assesses whether testing is being conducted. Removing the HA1C-AD measure will reduce state burden without losing the value of measuring diabetes control.¹⁴
- Annual Monitoring for Patients on Persistent Medications (MPM-AD) (NQF#2371) because this measure is being retired by the measure steward.¹⁵

For the 2020 update, CMCS will add two measures to the Adult Core Set:

- National Core Indicators (NCI) Survey. This survey assesses the experience and outcomes of individuals with intellectual and developmental disabilities and their families.¹⁶
- Use of Pharmacotherapy for Opioid Use Disorder (NQF#3400). This measure assesses the percentage of Medicaid beneficiaries ages 18 to 64 with an opioid use disorder (OUD) who filled a prescription for, or were administered or ordered, a Food and Drug Administration-approved medication for the disorder during the measurement year.¹⁷

The addition of these measures will allow CMCS and states to expand the measurement of quality of care for adults in Medicaid in two areas: (1) long-term services and supports (LTSS) and (2) behavioral health. There has been a critical measurement gap in the area of LTSS,

¹⁴ Measure Steward: National Committee for Quality Assurance, [NQF#0057](#)

¹⁵ Measure Steward: National Committee for Quality Assurance, [NQF#2371](#)

¹⁶ Measure Steward: National Association of State Directors of Developmental Disabilities Services (NASDDDS) and Human Services Research Institute (HSRI).

¹⁷ Measure Steward: Centers for Medicare & Medicaid Services, [NQF#3400](#)

including home and community based services, since the Adult Core Set was established. The addition of the NCI survey would start to address this gap area. The addition of Pharmacotherapy for Opioid Use Disorder measure supports the need to address medication-assisted treatment (MAT) for opioid use disorders and improves understanding of the quality of care across the continuum of care for substance use disorders.

Additional information about the Child and Adult Core Set Annual Review process that took place in 2019 and the recommendations to CMCS can be found at:

<https://www.medicaid.gov/medicaid/quality-of-care/performance-measurement/adult-core-set/index.html>

Effective Date of Revisions to the Core Sets

The 2020 updates to the Core Sets will take effect in the FFY 2020 reporting cycle, which will begin in the early fall of 2020. To support states, CMCS will release updated technical specifications for both Core Sets in spring 2020 and make them available at:

<https://www.medicaid.gov/medicaid/quality-of-care/index.html>.

States with questions or that need further assistance with reporting and quality improvement regarding the Child and Adult Core Sets can submit questions or requests to:

MACQualityTA@cms.hhs.gov.

If you have questions about this bulletin, please contact Karen Matsuoka, PhD, at karen.matsuoka@cms.hhs.gov, or call (410)786-9726.