

2024 Medicaid and CHIP (MAC) Scorecard

Fact Sheet

The MAC Scorecard is a CMS dashboard that draws from over 30 datasets derived from state and federal reporting efforts. CMS developed the MAC Scorecard with the goal of improving transparency and accountability for Medicaid and the Children's Health Insurance Program (CHIP) administration and health outcomes. The measures selected for inclusion in the MAC Scorecard represent key data points that reflect CMS' priorities across different facets of Medicaid and CHIP.

The 2024 MAC Scorecard is organized by the following pillars:

- **24 measures under Program Characteristics** that describe aspects of Medicaid and CHIP and highlight variations across states in the areas of care delivery, data collection efforts, eligibility and enrollment, and expenditures.
- **23 measures under Health Care Quality Performance** that show how states serve Medicaid and CHIP beneficiaries in areas related to the quality of health care.
- **12 measures under Federal and State Program Administration** that can be used to assess the effectiveness and efficiency of federal and state partnerships.

New Website Feature

This year's MAC Scorecard includes a new State Focus feature that allows users to focus exclusively on one, two, or three states or territories. By applying this filter, Scorecard users can look at performance values for their selection of states or territories across all applicable measures in the MAC Scorecard in a single view.

Key takeaways from this year's MAC Scorecard:

- States are increasingly meeting the targets for the Outcomes Based Assessment (OBA) framework used to determine the quality of Transformed Medicaid Statistical Information System (T-MSIS) data. OBA targets a subset of all T-MSIS data quality checks that have been prioritized for the most critical Medicaid and CHIP content areas.
 - OBA targets have been in place since 2021 and outcomes are improving with 39 states meeting OBA targets in April 2024, compared to 35 in April 2023 and 25 in April 2022.
- Through home and community-based services (HCBS), people can receive long-term services and supports (LTSS) in their own homes and communities instead of in institutional settings. Both the share of total LTSS users receiving HCBS and the share of total Medicaid LTSS spending devoted to HCBS reached all-time highs in 2021, as states continued to focus on serving more people in home and community-based settings and reducing use of institutional services.
 - In 2021, 63.2 percent of Medicaid LTSS expenditures were for HCBS, while 86.2 percent of LTSS users received HCBS.¹
- CMS is processing more non-disaster related State Plan Amendments (SPAs) within the first 90 days when compared to the first year that CMS started collecting data on this measure.
 - 82 percent of non-disaster related SPAs approved in the first 90 days of calendar years (CYs) 2022 and 2023, compared with 64 percent approved in the first 90 days in CY 2016.²

¹ Trends in the Use of and Spending for Home and Community-Based Services as a Share of Total LTSS Use and Spending in Medicaid, 2019-2021. Mathematica. <https://www.medicaid.gov/medicaid/long-term-services-supports/downloads/ltss-rebalancing-brief.pdf>.

² The percentage of non-disaster related State Plan Amendments approved in the first 90 days in CY 2016, CY 2022, and CY 2023. This measure is calculated using CMS administrative data.

- State reporting on measures from the Child and Adult Core Sets continued to increase in the 2023 Core Set:
 - The median number³ of Child Core Set measures reported by states was 25.5, up from 21.5 measures reported for the 2022 Child Core Set and 20 measures for the 2021 Child Core Set.⁴
 - The median number of Adult Core Set measures reported by states was 28, up from 26 measures reported for the 2022 Adult Core Set and 23.5 measures reported for the 2021 Adult Core Set.⁵
- National Core Indicator survey of the experience and self-reported outcomes for LTSS users ages 18 and older with intellectual and developmental disabilities show that in 2023, the majority of individuals:
 - Make choices about their everyday lives, including their daily schedule, how to spend money, and free time activities (89.4 percent).⁶
 - Always have a way to get places when they need to go somewhere (93.5 percent).⁷

³ For the purposes of the MAC Scorecard, median numbers are rounded to the nearest whole number.

⁴ Quality of Care for Children and Adults in Medicaid and CHIP: Overview of Findings from the 2023 Child and Adult Core Sets, Fact Sheet. September 2024. <https://www.medicaid.gov/medicaid/quality-of-care/downloads/2023-core-set-reporting.pdf>.

⁵ Quality of Care for Children and Adults in Medicaid and CHIP: Overview of Findings from the 2023 Child and Adult Core Sets, Fact Sheet. September 2024. <https://www.medicaid.gov/medicaid/quality-of-care/downloads/2023-core-set-reporting.pdf>.

⁶ National Core Indicators Survey. 2023 Child and Adult Health Care Measures Quality dataset, updated September 2024. <https://data.medicaid.gov/dataset/e85033c7-367e-467e-9e81-8e85048102b8>.

⁷ National Core Indicators Survey. 2023 Child and Adult Health Care Measures Quality dataset, updated September 2024. <https://data.medicaid.gov/dataset/e85033c7-367e-467e-9e81-8e85048102b8>.