#### Appendix



#### CHIPRA 2016 Child Core Measure Set



	Category	Measure	Measure Description	Measure Type	Medicaid Claims Data	Measure Steward
	Access to Care	Child and Adolescents' Access to Primary Care Practitioners (CAP)	<ul> <li>The percentage of members 12 months-19 years of age who had a visit with a PCP(Primary care practitioner). The organization reports four separate percentages for each product line.</li> <li>Children 12-24 months and 25 months-6 years who had a visit with a PCP during the measurement year.</li> <li>Children 7-11 years and adolescents 12-19 years who had a visit with a PCP during the measurement year or the year prior to the measurement year.</li> </ul>	Process	Yes	NCQA
		Chlamydia Screening in Women (CHL)	The percentage of women 16–24 years of age who were identified as sexually active and who had at least one test for chlamydia during the measurement year.	Process	Yes	NCQA
	ntive Care	Childhood Immunization Status (CIS)	Percentage of children 2 years of age who had four diphtheria, tetanus and acellular pertussis (DtaP); three polio (IPV); one measles, mumps and rubella (MMR); three H influenza type B (HiB); three hepatitis B (HepB); one chicken pox (VZV); four pneumococcal conjugate (PCV); one hepatitis A (HepA); two or three rotavirus (RV); and two influenza (flu) vaccines by their second birthday. The measure calculates a rate for each vaccine and nine separate combination rates.	Process	Yes	NCQA
	Preventive	Well-Child Visits in the First 15 Month of Life (W15)	The percentage of children 15 months old who had the recommended number of well-child visits with a PCP during their first 15 months of life.	Process	Yes	NCQA
		Immunizations for Adolescents (IMA)	The percentage of adolescents 13 years of age who had the recommended immunizations (meningococcal vaccine and one tetanus, diphtheria toxoids and acellular pertussis vaccine (Tdap) or one tetanus, diphtheria toxoids vaccine (Td)) by their 13th birthday. (HPV added in 2017 specification)	Process	No	NCQA

Category	Measure	Measure Description	Measure Type	Medicaid Claims Data	Measure Steward
Φ	Developmental Screening in the First Three Years of Life (DEV)	The percentage of children screened for risk of developmental, behavioral and social delays using a standardized screening tool in the first three years of life. This is a measure of screening in the first three years of life that includes three, age-specific indicators assessing whether children are screened by 12 months of age, by 24 months of age and by 36 months of age.	Process	No	OHSU
Preventive Care	Well-Child Visits in the 3rd, 4th, 5th, and 6th Years of Life (W34)	The percentage of children 3-6 years of age who had one or more well-child visits with a PCP during the measurement year	Process	Yes	NCQA
Prev	Human Papillomavirus Vaccine for Female Adolescents (HPV)	Percentage of female adolescents 13 years of age who had three doses of the human papillomavirus (HPV) vaccine by their 13th birthday.	Process	Yes	NCQA
	Adolescent Well-Care Visit (AWC)	The percentage of enrolled members 12–21 years of age who had at least one comprehensive well-care visit with a PCP or an OB/GYN practitioner during the measurement year.	Process	No	NCQA
Maternal and Perinatal Health	Pediatric Central Line- Associated Bloodstream Infections – Neonatal Intensive Care Unit and Pediatric Intensive Care Unit (CLABSI)	Standardized Infection Ratio (SIR) of healthcare-associated, central line-associated bloodstream infections (CLABSI) will be calculated among patients in bedded inpatient care locations.  This includes acute care general hospitals, long-term acute care hospitals, rehabilitation hospitals, oncology hospitals, and behavioral health hospitals.	Outcome	No	CDC



Category	Measure	Measure Description	Measure Type	Medicaid Claims Data	Measure Steward
	PC-02: Cesarean Section (PC02)	Percentage of nulliparous women with a term, singleton baby in a vertex position delivered by cesarean section.	Outcome	No	Joint Commission
	Live Births Weighing Less Than 2,500 Grams (LBW)	The adjusted rate for live infants weighing less than 2500 grams among all deliveries by women continuously enrolled in a plan for 10 or more months.	Outcome	No	CDC
Percentage of Medicaid delivering measurement year and November of expected processes and Care (FPC)  Frequency of Ongoing Prenatal Care (FPC)  Frequency of Ongoing Prenatal Care (FPC)  •<21 percent of expected visits •21 percent—40 percent of expected visits •41 percent—60 percent of expected processes and the contraction	Percentage of Medicaid deliveries between November 6 of the year prior to the measurement year and November 5 of the measurement year that received the following number of expected prenatal visits:  •<21 percent of expected visits  •21 percent—40 percent of expected visits  •41 percent—60 percent of expected visits  •61 percent—80 percent of expected visits  •> or =81 percent of expected visits	Process	Yes	NCQA	
Maternal and	Prenatal & Postpartum Care: Timeliness of Prenatal Care (PPC)	<ul> <li>2 part measure: Percentage of Medicaid/CHIP deliveries of live births between November 6 of the year prior to the measurement year and November 5 of the measurement year that had a prenatal care visit in the first trimester or within 42 days of enrollment in Medicaid/CHIP. The percentage of deliveries of live births between November 6 of the year prior to the measurement year and November 5 of the measurement year.</li> <li>Rate 1: Timeliness of Prenatal Care. The percentage of deliveries that received a prenatal care visit as a patient of the organization in the first trimester or within 42 days of enrollment in the organization.</li> <li>Rate 2: Postpartum Care. The percentage of deliveries that had a postpartum visit on or between 21 and 56 days after delivery.</li> </ul>	Process	Yes	NCQA



Category	Measure	Measure Description	Measure Type	Medicaid Claims Data	Measure Steward
and al	Audiological Evaluation No Later Than 3 Months of Age (AUD)*	This measure assesses the percentage of newborns who did not pass hearing screening and have an audiological evaluation no later than 3 months of age.	Process	No	CDC
Maternal and Perinatal Health	Behavioral Health Risk Assessment (for Pregnant Women) (BHRA)	Percentage of women, regardless of age, that gave birth during a 12-month period seen at least once for prenatal care who received a behavioral health screening risk assessment that includes the following screenings at the first prenatal visit: depression, alcohol use, tobacco use, drug use, and intimate partner violence.	Process	No	AMA-PCPI
⊣ealth	Follow-Up Care for Children Prescribed Attention- Deficit/Hyperactivity Disorder (ADHD) Medication (ADD)	The percentage of children newly prescribed attention-deficit/hyperactivity disorder (ADHD) medication who had at least three follow-up care visits within a 10-month period, one of which is within 30 days of when the first ADHD medication was dispensed.  An Initiation Phase Rate and Continuation and Maintenance Phase Rate are reported.	Process	Yes	NCQA
Behavioral Health	Follow-Up After Hospitalization for Mental Illness (FUH)	The percentage of discharges for patients 6 years of age and older who were hospitalized for treatment of selected mental illness diagnoses and who had an outpatient visit, an intensive outpatient encounter or partial hospitalization with a mental health practitioner. Two rates are reported:  - The percentage of discharges for which the patient received follow-up within 30 days of discharge  - The percentage of discharges for which the patient received follow-up within 7 days of discharge.	Process	Yes	NCQA

Category	Measure	Measure Description	Measure Type	Medicaid Claims Data	Measure Steward
Behavioral Health	Child and Adolescent Major Depressive Disorder: Suicide Risk Assessment (SRA)	Percentage of patient visits for those patients aged 6 through 17 years with a diagnosis of major depressive disorder with an assessment for suicide risk.	Process	No	AMA-PCP
Beha	Use of Multiple Concurrent Antipsychotics in Children and Adolescents (APC)	Percentage of children and adolescents 1 to 17 years of age who were on two or more concurrent antipsychotic medications.	Process	No	NCQA
of Acute and Chronic Conditions	Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents – Body Mass Index Assessment for Children/Adolescents (WCC)	Percentage of patients 3-17 years of age who had an outpatient visit with a Primary Care Physician (PCP) or Obstetrician/Gynecologist (OB/GYN) and who had evidence of the following during the measurement period. Three rates are reported.  - Percentage of patients with height, weight, and body mass index (BMI) percentile documentation  - Percentage of patients with counseling for nutrition  - Percentage of patients with counseling for physical activity	Process	No	NCQA
Care of Acute and Ch	Medication Management for People with Asthma (MMA)	<ul> <li>2 part measure: The percentage of patients 5-64 years of age during the measurement year who were identified as having persistent asthma and were dispensed appropriate medications that they remained on during the treatment period. Two rates are reported.</li> <li>1. The percentage of patients who remained on an asthma controller medication for at least 50% of their treatment period.</li> <li>2. The percentage of patients who remained on an asthma controller medication for at least 75% of their treatment period.</li> <li>[A] ages 5-18 [B] ages 19-64</li> </ul>	Process	Yes	NCQA



Category	Measure	Measure Description	Measure Type	Medicaid Claims Data	Measure Steward
Care of Acute and Chronic Conditions	Ambulatory Care – Emergency Department (ED) Visits (AMB)	Rate of emergency department (ED) visits per 1,000 enrollee months among children up to age 19.	Process	Yes	NCQA
ealth	Prevention: Dental Sealants for 6–9 Year-Old Children at Elevated Caries Risk (SEAL)	Percentage of enrolled children in the age category of 6-9 years at "elevated" risk (i.e., "moderate" or "high") who received a sealant on a permanent first molar tooth within the reporting year.	Process	Yes	DQA (ADA)
Oral Health	Percentage of Eligibles Who Received Preventive Dental Services (PDENT)	The percentage of individuals ages 1 to 20 that are enrolled in Medicaid or CHIP Medicaid Expansion programs, are eligible for Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) services, and that received preventive dental services.	Process	Yes	CMS
Experience of Care	Consumer Assessment of Healthcare Providers and Systems (CAHPS®) 5.0H (Child Version Including Medicaid and Children with Chronic Conditions Supplemental Items) (CPC)	The Consumer Assessment of Healthcare Providers and Systems Hospital Survey – Child Version (Child HCAHPS) is a standardized survey instrument that asks parents and guardians (henceforth referred to as parents) of children under 18 years old to report on their and their child's experiences with inpatient hospital care.	Outcome	No	NCQA



#### VBP Workgroup Recommended Measures



#### Pediatric & Adolescent Preventive Care – VBP Workgroup Recommended

#	Measure	Measure Description	Measure Type	Medicaid Claims Data	Measure Steward
1	Preventive Care and Screening: Influenza Immunization	Percentage of patients aged 6 months and older seen for a visit between October 1 and March 31 who received an influenza immunization OR who reported previous receipt of an influenza immunization	Process	No	AMA PCPI
2	Topical Fluoride for Children at Elevated Caries Risk, Dental Services	Percentage of enrolled children aged 1-21 years who are at "elevated" risk (i.e., "moderate" or "high") who received at least 2 topical fluoride applications within the reporting year.	Process	Yes	ADA
3	Childhood Immunization Status	Percentage of children 2 years of age who had four diphtheria, tetanus and acellular pertussis (DtaP); three polio (IPV); one measles, mumps and rubella (MMR); three H influenza type B(HiB); three hepatitis B (HepB); one chicken pox (VZV); four pneumococcal conjugate (PCV); one hepatitis A (HepA); two or three rotavirus (RV); and two influenza (flu) vaccines by their second birthday. The measure calculates a rate for each vaccine and nine separate combination rates.	Process	Yes	NCQA
4	Weight Assessment and Counseling for Nutrition and Physical Activity for Children and Adolescents	Percentage of patients 3-17 years of age who had an outpatient visit with a Primary Care Physician (PCP) or Obstetrician/Gynecologist (OB/GYN) and who had evidence of the following during the measurement period. Three rates are reported.  - Percentage of patients with height, weight, and body mass index (BMI) percentile documentation  - Percentage of patients with counseling for nutrition  - Percentage of patients with counseling for physical activity	Process	No	NCQA



### Pediatric & Adolescent Preventive Care – VBP Workgroup Recommended, *cont'd*

#	Measure	Measure Description	Measure Type	Medicaid Claims Data	Measure Steward
5	Preventive Care and Screening: Screening for Clinical Depression and Follow-Up Plan	Percentage of patients aged 12 years and older screened for clinical depression using an age appropriate standardized tool AND follow-up plan documented	Process	No	CMS
6	Chlamydia Screening for Women	Percentage of women 16-24 years of age who were identified as sexually active and who had at least one test for chlamydia during the measurement period	Process	Yes	NCQA
7	Preventive Care and Screening: Body Mass Index (BMI) Screening and Follow-Up Plan	Percentage of patients aged 18 years and older with a documented BMI during the current encounter or during the previous six months AND when the BMI is outside of normal parameters, a follow-up plan is documented during the encounter or during the previous six months of the encounter.	Process	No	CMS
8	Tobacco Use: Screening and Cessation Intervention	Percentage of patients aged 18 year and older who were screened for tobacco use one or more times within 24 months AND who received cessation counseling intervention if identified as a tobacco user.	Process	No	AMA PCPI



#### Asthma – VBP Workgroup Recommended

#	Measure	Measure Description	Measure Type	Medicaid Claims Data	Measure Steward
9	Home Management Plan of Care (HMPC) Document Given to Patient/Caregiver (process)	An assessment that there is documentation in the medical record that a Home Management Plan of Care (HMPC) document was given to the pediatric (age of 2 through 17 years) asthma patient/caregiver	Process	No	Joint Commission
10	Potentially Avoidable Complications - Asthma	In development	Outcome	Yes	HCI3
11	Assessment of Asthma Control – Ambulatory Care Setting	Percentage of patients aged 5 years and older with a diagnosis of asthma who were evaluated for asthma control (comprising asthma impairment and asthma risk) at least once during the measurement period	Process	Yes	AAAAI
12	Lung Function/Spirometry Evaluation	Percentage of patients aged 5 years and older with asthma and documentation of a spirometry evaluation	Process	Yes	NCQA
13	Patient Self-Management and Action Plan	Percentage of patients aged 5 years and older with asthma and documentation of an asthma self management plan	Process	No	AAAAI
14	Medication Management for People with Asthma (MMA)	2 part measure: The percentage of patients 5-64 years of age during the measurement year who were identified as having persistent asthma and were dispensed appropriate medications that they remained on during the treatment period. Two rates are reported.  1. The percentage of patients who remained on an asthma controller medication for at least 50% of their treatment period.  2. The percentage of patients who remained on an asthma controller medication for at least 75% of their treatment period.  [A] ages 5-18 [B] ages 19-64	Process	Yes	NCQA



#### Diabetes – VBP Workgroup Recommended

#	Measure	Measure Description	Measure Type	Medicaid Claims Data	Measure Steward
15	Potentially Avoidable Complications - Diabetes	In development	Outcome	Yes	HCl3
16	Medical Attention for Nephropathy	The percentage of patients 18-75 years of age with diabetes who had a nephropathy screening test or evidence of nephropathy during the measurement period	Process	Yes	NCQA
17	Hemoglobin A1c (HbA1c) testing performed	The percentage of patients 18-75 years of age with diabetes (type 1 and type 2) who received an HbA1c test during the measurement year.	Process	Yes	NCQA
18	Hemoglobin A1c (HbA1c) Poor Control (<8.0 or >9.0%)	The percentage of patients 18-75 years of age with diabetes (type 1 and type 2) whose most recent HbA1c level is <8.0% during the measurement year.	Outcome	Yes	NCQA
19	Eye Exam (retinal) performed	Percentage of patients 18 - 75 years of age with diabetes who had a retinal or dilated eye exam by an eye care professional during the measurement period or a negative retinal or dilated eye exam (no evidence of retinopathy) in the 12 months prior to the measurement period	Process	Yes	NCQA
20	Foot Exam	Percentage of patients aged 18-75 years of age with diabetes who had a foot exam during the measurement period	Process	Yes	NCQA
21	Composite measure: Comprehensive Diabetes Care: Three Tests	Number of people (18-75) who received at least one of each of the following tests: HbA1c test, diabetes eye exam, and medical attention for nephropathy	Process	Yes	NCQA



#### Newborn/Mother – VBP Workgroup Recommended

#	Measure	Measure Description	Measure Type	Medicaid Claims Data	Measure Steward
22	Birth Trauma Rate – Injury to Neonate	Percentage of newborn discharges with an ICD-9-CM diagnosis code of birth trauma in a one-year time period.	Outcome	Yes	AHRQ
23	Monitoring and Reporting of NICU Referral Rates	In development	Process	No	Development Needed
24	PC-05 Exclusive Breast Milk Feeding [% of Babies Who Were Exclusively Fed with Breast Milk During Stay]	This measure assesses the number of newborns exclusively fed breast milk feeding during the newborn's entire hospitalization.	Process	No	Joint Commission
25	Percent Preterm Births	Number of infants born at less than 37 weeks gestation among infants with known gestational age	Outcome	No	NYS DOH
26	Risk-Adjusted Low Birth Weight [Live births weighing less than 2,500 grams (preterm v. full term)]	The adjusted rate for live infants weighing less than 2500 grams among all deliveries by women continuously enrolled in a plan for 10 or more months.	Outcome	No	NYS DOH
27	Under 1500g Infant Not Delivered at Appropriate Level of Care	The number per 1,000 live births of <1500g infants delivered at hospitals not appropriate for that size infant.	Process	Yes	California Maternal Quality Care Collaborative (CA MQCC)



#### Newborn/Mother – VBP Workgroup Recommended, cont'd

#	Measure	Measure Description	Measure Type	Medicaid Claims Data	Measure Steward
28	Hepatitis B Vaccine Coverage Among All Live Newborn Infants Prior to Discharge	Percent of live newborn infants that receive hepatitis B vaccination before discharge at each single hospital/birthing facility during given time period (one year).	Process	No	CDC
29	LARC Uptake	Primary measure (intermediate outcome): Percentage of women ages 15–44 years of age who are at risk of unintended pregnancy that adopt or continue use of FDA-approved methods of contraception that are most or moderately effective (i.e., male or female sterilization, implants, intrauterine devices [IUD] or intrauterine systems [IUS], Depo-Provera (the 'shot'), oral contraceptive pills, patch, ring, and diaphragm). Sub-measure (access): Percentage of women ages 15–44 years of age who are at risk of unintended pregnancy that adopt or continue use of FDA-approved methods of contraception that are long-acting reversible contraception (LARC) (i.e., implants, IUDs, or IUSs).	Access	No	CMS
30	Frequency of Ongoing Prenatal Care (FPC)	Percentage of Medicaid deliveries between November 6 of the year prior to the measurement year and November 5 of the measurement year that received the following number of expected prenatal visits:  •<21 percent of expected visits  •21 percent—40 percent of expected visits  •41 percent—60 percent of expected visits  •61 percent—80 percent of expected visits  •> or =81 percent of expected visits	Process	Yes	NCQA
31	PC-01 Elective Delivery (% of Early Elective Deliveries)	Percentage of Medicaid and CHIP enrolled women with elective vaginal deliveries or elective cesarean sections at ≥37 and <39 weeks of gestation completed.	Outcome	No	Joint Commission



#### Newborn/Mother – VBP Workgroup Recommended, cont'd

#	Measure	Measure Description	Measure Type	Medicaid Claims Data	Measure Steward
32	PC-02 Cesarean Section	Percentage of nulliparous women with a term, singleton baby in a vertex position delivered by cesarean section.	Outcome	No	Joint Commission
33	Incidence of Episiotomy [% of Vaginal Deliveries With Episiotomy]	Percentage of vaginal deliveries (excluding those coded with shoulder dystocia) during which an episiotomy is performed.	Outcome	No	Christiana Care Health System
34	Vaginal Births after Cesarean Section	The percentage of women continuously enrolled for 10 or more months who delivered a live birth vaginally after having had a prior cesarean delivery.  Measure will be calculated by the Office of Quality and Patient Safety using the birth data submitted by plans and the Department's Vital Statistics Birth File.	Outcome	No	NYS-Specific Prenatal Care Measure OQPS
35	Prenatal & Postpartum Care: Timeliness of Prenatal Care (PPC)	<ul> <li>2 part measure: Percentage of Medicaid/CHIP deliveries of live births between November 6 of the year prior to the measurement year and November 5 of the measurement year that had a prenatal care visit in the first trimester or within 42 days of enrollment in Medicaid/CHIP. The percentage of deliveries of live births between November 6 of the year prior to the measurement year and November 5 of the measurement year.</li> <li>Rate 1: Timeliness of Prenatal Care. The percentage of deliveries that received a prenatal care visit as a patient of the organization in the first trimester or within 42 days of enrollment in the organization.</li> <li>Rate 2: Postpartum Care. The percentage of deliveries that had a postpartum visit on or between 21 and 56 days after delivery.</li> </ul>	Process	Yes	NCQA



## Behavioral Health – Depression & Anxiety – VBP Workgroup Recommended\*

1	# Measure	Measure Description	Measure Type	Medicaid Claims Data	Measure Steward
3	Diagnosis (IMPACT Model)	Percentage of patients with a positive screen who receive a structured depression assessment (e.g. PHQ-9) to help confirm a diagnosis of depression within 4 weeks of screening.	Process	No	University of Washington
3	Initiation of Treatment (IMPACT Model)	Percentage of primary care patients diagnosed with depression who initiated treatment (antidepressant medication, psychotherapy, or ECT) or attended a mental health specialty visit within 4 weeks of initial diagnosis.	Process	No	University of Washington
3	Adjustment of Treatment Based on Outcomes (IMPACT Model)  Percentage of primary care patients treated for depression with a PHQ-9 score of >= 10 at follow up who receive an adjustment to their depression treatment (e.g. change in antidepressant medication or psychotherapy) or attend a mental health specialty consult within 8-12 weeks of initiating treatment.		Process	No	University of Washington
3	Symptom Reduction (IMPACT Model)	Percentage of patients treated for depression who have a decrease > 50% in depression symptom levels from baseline as measured by the PHQ-9 or similar quantifiable measure and a PHQ-9 score < 10 within 6 months of initiating treatment.	Outcome	No	University of Washington

<sup>\*</sup> Under VBP Workgroup review



# Behavioral Health – Depression & Anxiety – VBP Workgroup Recommended\*, *cont'd*

#	Measure Measure Description		Measure Type	Medicaid Claims Data	Measure Steward
40	Generalized Anxiety Disorder 7-item (GAD 7) Scale	In development		No	SAMHSA
41	Potentially Avoidable Complications - Depression and Anxiety	In development	Outcome	Yes	HCI3



<sup>\*</sup> Under VBP Workgroup review

### Behavioral Health – Depression & Anxiety – VBP Workgroup Recommended\*, *cont'd*

	#	Measure	Measure Description	Measure Type	Medicaid Claims Data	Measure Steward
2	<b>42</b>	Antidepressant Medication Management - Effective Acute Phase Treatment & Effective Continuation Phase Treatment	2 part measure The percentage of patients 18 years of age and older with a diagnosis of major depression and were newly treated with antidepressant medication, and who remained on an antidepressant medication treatment. Two rates are reported.  a) Effective Acute Phase Treatment. The percentage of newly diagnosed and treated patients who remained on an antidepressant medication for at least 84 days (12 weeks). b) Effective Continuation Phase Treatment. The percentage of newly diagnosed and treated patients who remained on an antidepressant medication for at least 180 days (6 months).	Process	Yes	NCQA
2	13	Follow-up After Discharge from the Emergency Department for Mental Health or Alcohol or Other Drug Dependence	2 part measure: The percentage of discharges for patients 18 years of age and older who had a visit to the emergency department with a primary diagnosis of mental health or alcohol or other drug dependence during the measurement year AND who had a follow-up visit with any provider with a corresponding primary diagnosis of mental health or alcohol or other drug dependence within 7- and 30-days of discharge. Two rates are reported: The percentage of emergency department visits for mental health for which the patient received follow-up within 7 days of discharge. The percentage of emergency department visits for mental health for which the patient received follow-up within 30 days of discharge.	Process	No	NCQA

<sup>\*</sup> Under VBP Workgroup review



## Behavioral Health – Substance Use Disorder (SUD) – VBP Workgroup Recommended\*

#	Measure	Measure Description	Measure Type	Medicaid Claims Data	Measure Steward
44	Initiation and Engagement of Alcohol and Other Drug Dependence Treatment (IET)	<ul> <li>The percentage of adolescent and adult patients with a new episode of alcohol or other drug (AOD) dependence who received the following.</li> <li>Initiation of AOD Treatment. The percentage of patients who initiate treatment through an inpatient AOD admission, outpatient visit, intensive outpatient encounter or partial hospitalization within 14 days of the diagnosis.</li> <li>Engagement of AOD Treatment. The percentage of patients who initiated treatment and who had two or more additional services with a diagnosis of AOD within 30 days of the initiation visit.</li> </ul>	Process	Yes	NCQA
45	Continuity of care within 14 days of discharge from any level of SUD inpatient care (COC)	OASAS measure under development	Process	Yes	Washington Circle Group
46	Initiation and engagement of Alcohol and other Drug Dependence Treatment with Continuing Engagement in Treatment (CET)	OASAS measure under development	Process	Yes	OASAS
47	Potentially Avoidable Complications - SUD	In development	Outcome	Yes	HCI3

<sup>\*</sup> Under VBP Workgroup review



# Behavioral Health – Substance Use Disorder (SUD) – VBP Workgroup Recommended\*, *cont'd*

#	Measure	Measure Description	Measure Type	Medicaid Claims Data	Measure Steward
48	Initiation of MAT for Alcohol Dependence  In development: The percentage of individuals with a claim associated we episode of alcohol use disorder receiving appropriate pharmacotherapy we of the diagnosis.		Process	Yes	OASAS
49	Initiation of MAT for Opioid Dependence	<b>In development:</b> The percentage of individuals with a claim associated with a new episode of opioid use disorder receiving appropriate pharmacotherapy within 30 days of the diagnosis.	Process	Yes	OASAS
50	Utilization of MAT for Alcohol Dependence	In development: The number and percentage of individuals receiving an alcohol use disorder diagnosis who subsequently receive at least one prescription or administration for appropriate pharmacotherapy during the measurement year.	Process	Yes	OASAS
51	Utilization of MAT for Opioid Dependence	In development: The number and percentage of individuals receiving an opioid dependence diagnosis who subsequently receive at least one prescription or administration for appropriate pharmacotherapy during the measurement year.	Process	Yes	OASAS
52	Connection to Community Recovery Supports	OASAS measure under development	Process	No	OASAS

<sup>\*</sup> Under VBP Workgroup review



### Behavioral Health – Trauma and Stressor – VBP Workgroup Recommended\*

#	Measure	Measure Description		Medicaid Claims Data	Measure Steward
5	Primary Care PTSD Screen (PC-PTSD)	The Primary Care PTSD Screen (PC-PTSD) is a 4-item screen that was designed for use in primary care and other medical settings, and is currently used to screen for PTSD in Veterans using VA health care. The screen includes an introductory sentence to cue respondents to traumatic events. The screen does not include a list of potentially traumatic events.	Process	No	National Center for PTSD
5	Potentially Avoidable Complications - Trauma and Stressor	In development	Outcome	Yes	HCI3

NEW YORK STATE OF OPPORTUNITY. Department of Health

#### Additional measure considerations



## Pediatric QARR Measures not Currently Included in NYS VBP Arrangements

Category	#	Measure	Measure Description	Measure Type	Medicaid Claims Data	Measure Steward
Access to Care	55	Child and Adolescents' Access to Primary Care Practitioners (CAP)	<ul> <li>The percentage of members 12 months-19 years of age who had a visit with a PCP(Primary care practitioner). The organization reports four separate percentages for each product line.</li> <li>Children 12-24 months and 25 months-6 years who had a visit with a PCP during the measurement year.</li> <li>Children 7-11 years and adolescents 12-19 years who had a visit with a PCP during the measurement year or the year prior to the measurement year.</li> </ul>	Process	Yes	NCQA
	56	Well-Child Visits in the First 15 Month of Life (W15)	The percentage of children 15 months old who had the recommended number of well-child visits with a PCP during their first 15 months of life.	Process	Yes	NCQA
Care	57	Lead Screening in Children	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.	Process	No	NCQA
Preventive	58	Annual Dental Visit	Percentage of patients 2-21 years of age who had at least one dental visit during the measurement year. This measure applies only if dental care is a covered benefit in the organization's Medicaid contract.	Process	Yes	NCQA
Pr	59	Well-Child Visits in the 3rd, 4th, 5th, and 6th Years of Life (W34)	The percentage of children 3-6 years of age who had one or more well-child visits with a PCP during the measurement year	Process	Yes	NCQA



### Pediatric QARR Measures not Currently Included in NYS VBP Arrangements, *cont'd*

Category	#	Measure	Measure Description	Measure Type	Medicaid Claims Data	Measure Steward
	60	Asthma Medication Ratio	The percentage of patients 5–64 years of age who were identified as having persistent asthma and had a ratio of controller medications to total asthma medications of 0.50 or greater during the measurement year.	Process	Yes	NCQA
Preventive Care	61	Adolescent Preventative Care Measures	4 part measure -The percentage of adolescents ages 12 to 17 who had at least one outpatient visit with a PCP or OB/GYN practitioner during the measurement year, and received the following four components of care during the measurement year:  1. Assessment or counseling or education on risk behaviors and preventive actions associated with sexual activity,  2. Assessment or counseling or education for depression,  3. Assessment or counseling or education about the risks of tobacco usage, and  4. Assessment or counseling or education about the risks of substance use (including alcohol and excluding tobacco).	Process	No	NYS
	62	Adolescent Well-Care Visit (AWC)	The percentage of enrolled members 12–21 years of age who had at least one comprehensive well-care visit with a PCP or an OB/GYN practitioner during the measurement year.	Process	No	NCQA



# Pediatric QARR Measures not Currently Included in NYS VBP Arrangements, *cont'd*

Category	#	Measure	Measure Description	Measure Type	Medicaid Claims Data	Measure Steward
Preventive Care	63	Immunizations for Adolescents (IMA)	The percentage of adolescents 13 years of age who had the recommended immunizations (meningococcal vaccine and one tetanus, diphtheria toxoids and acellular pertussis vaccine (Tdap) or one tetanus, diphtheria toxoids vaccine (Td)) by their 13th birthday. (HPV added in 2017 specification)	Process	No	NCQA
Prevent	64	Non-Recommended Cervical Cancer Screening in Adolescent Females	The percentage of adolescent females 16–20 years of age who were screened unnecessarily for cervical cancer.	Process	No	NCQA
0	65	Appropriate Testing for Children with Upper Respiratory Infection	Percentage of children 3 months to 18 years of age with a diagnosis of upper respiratory infection (URI) who were not dispensed an antibiotic medication.	Process	No	NCQA
Acute Care	Acute Care	Appropriate Testing for Children with Pharyngitis	The percentage of children 2–18 years of age who were diagnosed with pharyngitis, dispensed an antibiotic and received a group A streptococcus (strep) test for the episode.	Process	No	NCQA



## Pediatric QARR Measures not Currently Included in NYS VBP Arrangements, *cont'd*

Category	#	Measure	Measure Description	Measure Type	Medicaid Claims Data	Measure Steward
	67	Use of Multiple Concurrent Antipsychotics in Children and Adolescents (APC)	Percentage of children and adolescents 1 to 17 years of age who were on two or more concurrent antipsychotic medications.	Process	No	NCQA
	68	Metabolic Monitoring for Children and Adolescents on Antipsychotics	The percentage of children and adolescents 1–17 years of age who had two or more antipsychotic prescriptions and had metabolic testing.	Process	No	NCQA
lealth	69	Metabolic Screening for Children and Adolescents Newly on Antipsychotics	The percentage of children and adolescents 0 – 17 years of age who had a new prescription for an antipsychotic medication and had baseline metabolic screening.	Process	No	NCQA
Behavioral Health	70	Use of First-Line Psychosocial Care for Children and Adolescents on Antipsychotics	Percentage of children and adolescents 1–17 years of age with a new prescription for an antipsychotic, but no indication for antipsychotics, who had documentation of psychosocial care as first-line treatment.	Process	No	NCQA
Ber	71	Follow-Up Care for Children Prescribed Attention- Deficit/Hyperactivity Disorder (ADHD) Medication (ADD)	Percentage of children 6-12 years of age and newly dispensed a medication for attention-deficit/hyperactivity disorder (ADHD) who had appropriate follow-up care. Two rates are reported.  a. Percentage of children who had one follow-up visit with a practitioner with prescribing authority during the 30-Day Initiation Phase.  b. Percentage of children who remained on ADHD medication for at least 210 days and who, in addition to the visit in the Initiation Phase, had at least two additional follow-up visits with a practitioner within 270 days (9 months) after the Initiation Phase ended	Process	No	NCQA



#### Supporting slides

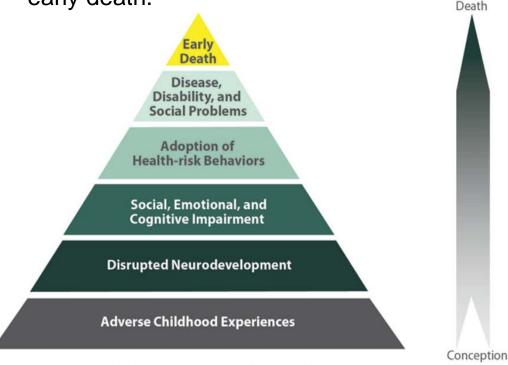


#### Adverse Childhood Experiences (ACE) Study

• The CDC – Kaiser Permanente Adverse Childhood Experiences (ACE) Study findings conclude that adverse childhood experiences have a significant negative impact life-long health and well-being, and are strongly related to the development of risk factors for disease.

ACEs have been linked to risky health behaviors, chronic health conditions, low life potential, and

early death.



#### Potential Measures to Prevent ACE:

- Home visiting to pregnant women and families with newborns
- Parent training programs
- Partner violence prevention
- Social support for parents
- Parent support programs for teens and teen pregnancy prevention programs

- Mental illness and substance abuse treatment
- High quality child care
- Sufficient income support for lower income families



Source: https://www.cdc.gov/violenceprevention/acestudy/about\_ace.html

Mechanism by Which Adverse Childhood Experiences

Influence Health and Well-being Throughout the Lifespan