

Maine IHOC Master List of Pediatric Measures with Numerators and Denominators

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Maine IHOC Master List of Pediatric Measures with Numerators/Denominators

OVERVIEW

The Maine CHIPRA Quality Demonstration Grant, Improving Health Outcomes for Children (IHOC), developed this Master List of Pediatric Measures based on clinical guidelines and a broad base of support. Building upon the CHIPRA Initial Core Set of Children’s Health Care Quality Measures, intensive stakeholder engagement resulted in the selection of additional quality measures (For a full list of participating stakeholders, see acknowledgements below). To encourage adoption of child health quality measures across a variety of measurement and quality improvement activities, this Master List also reflects IHOC’s emphasis on alignment. Examples of national alignment include the CHIPRA Initial Core Set of Children’s Health Care Quality Measures; CMS priority areas related to Medicaid’s Early and Periodic Screening, Diagnosis and Treatment (EPSDT) benefit, obesity, oral health, and behavioral health; the American Academy of Pediatrics’ Bright Futures guidelines; the National Committee on Quality Assurance; the National Quality Forum; and the CMS EHR Incentive Program for Meaningful Use. In addition to piloting select measures with IHOC’s practice improvement initiative known as the First STEPS Learning Collaborative, IHOC is also working to align with programs in the state such as Maine’s Multi-Payer Patient Centered Medical Home (PCMH) pilot and the Maine Health Management Coalition’s Pathways to Excellence public reporting program. As CMS and other groups continue to develop child health quality measures, IHOC will continue to review and revise this Master List based on feedback from a broad range of child health stakeholders in Maine.

ACKNOWLEDGEMENTS

The Master List of Pediatric Measures was developed as part of the Maine CHIPRA Quality Demonstration Grant. Through intensive stakeholder engagement, key stakeholders from across the state worked together to develop a comprehensive list of pediatric measures that includes the CHIPRA Initial Core Set of Children’s Health Care Quality Measures as well as additional clinically relevant pediatric quality measures. In their key roles with the IHOC Measures and Practice Improvement Committee and/or the Maine Child Health Improvement Partnership (ME CHIP), the following individuals were integral to initial and subsequent review processes: The Maine Chapter AAP’s Quality Improvement Committee—Amy Belisle, MD (also of Maine Quality Counts), Michael Ross, MD, and Stephen DiGiovanni, MD; Lisa Letourneau, MD, of Maine Quality Counts; Stephen Meister, MD, then of the Maine CDC; Nathaniel Anderson, MA, Mary Lindsey Smith, PhD, MSW, and Kyra Chamberlain, MS, RN, all of the Muskie School of Public Service, University of Southern Maine.

Navigating the Measures List

Utilizing the Table of Pediatric Measures:

- The **MEASURE** column has the full measure name and type (process or outcome measure)
- The **OPERATIONAL DEFINITION** column reflects standardized measure specifications, including numerators and denominators, as defined by the Measure Steward; for more detailed specifications for measures calculation please contact the measure steward.
- The **CHIPRA** column gives the measures CHIPRA acronym and the corresponding IHOC number is in the **IHOC#** column.
- The **MEASURE STEWARD** is the organization responsible for maintaining and updating a measures operational definition and the technical specifications for measure calculation. The steward will have the most up-to-date, detailed information about a particular measure.
- The **ALIGNMENT** column provides information on other state and national programs also using this measure for quality improvement initiatives.

Additional Tips and Resources:

- Instructions for how to adjust standardized measures (i.e., to calculate statewide or practice-level rates) are detailed in **footnotes** throughout the document.
- If a measure has been modified from the specifications designated by the measures steward, information on these modifications is outlined in **footnotes** throughout the document.
- The **Measure Steward** column is highlighted for all measures with an active measure steward.
- The resource section beginning on page 23 of this document has a variety of helpful resources and documentation including: A table of CHIPRA numbers and acronyms, a list of retired CMS measures, a glossary of key IHOC terms and an overview of key updates to the measures list.

A summary report of the pediatric quality measures collected by Maine for FFY 2009 -2013 is available at:

http://www.maine.gov/dhhs/oms/pdfs_doc/ihoc/Measures_Summary_Report_2013.pdf

For additional information on the IHOC List of Pediatric Measures contact Mary Lindsey Smith, PhD, MSW at mlsmith@usm.maine.edu.

For more information on the IHOC Project please contact Kyra Chamberlain, MS, RN at kyra.chamberlain@maine.edu.

Measures and Reporting Acronyms

ACIP	Advisory Committee on Immunization Practices
ACO	Accountable Care Organizations
AMA	American Medical Association
BF	Bright Futures
BTE	Bridges to Excellence
CDC	Centers for Disease Control and Prevention
CHIPRA	Children's Health Insurance Program Reauthorization Act
CMMI	Center for Medicare and Medicaid Innovation
CMS	Centers for Medicare and Medicaid Services
CMQCC	California Maternal Quality Care Collaborative
EPSDT	Early and Periodic Screening, Diagnosis, and Treatment
HEDIS	Healthcare Effectiveness Data and Information Set
MCLPPP	Maine Childhood Lead Poisoning Prevention Program
MIHMS	Maine Integrated Health Management Solution
MU	Meaningful Use
NCQA	National Committee for Quality Assurance
NHLBI	National Heart, Lung & Blood Institute
NQF	National Quality Forum
PCP	Primary Care Provider
PCPI	Physician Consortium for Performance Improvement
PTE	Pathways to Excellence
USPSTF	U.S. Preventative Services Task Force
WCV	Well Child Visit
WIC	Women, Infants and Children

Table of Pediatric Quality Measures

Measure	Operational Definition Numerator/Denominator	CHIPRA ¹	IHOC #	Measure Steward	Alignment
WELL-CHILD VISITS & ACCESS TO CARE²					
Well-Child Visits Well-Child Visits in the First 15 Months of Life PROCESS MEASURE	Numerator: Number of children in the denominator who received 0, 1, 2, 3, 4, 5, 6 or more well-child visits with a PCP during their first 15 months of life. Calculate rates for each number of visits. Denominator: Number of children who turn 15 months of age during the measurement year.	W15	31	NCQA/HEDIS	CHIPRA NQF #1392 EPSDT/BF CMMI
Well-Child Visits Well-child visits at 15, 18, and 24 months PROCESS MEASURE	Numerator: Number of children in the denominator who received 0, 1, 2, 3 or more well-child visits between 15 months and 3 years of age. Denominator: Number of children who turn 3 years during the measurement year and who are active patients in practice from 15 months to 3 years of age.		32		EPSDT/BF
Well-Child Visits Well-Child Visits in the 3rd, 4th, 5th and 6th Years of Life PROCESS MEASURE	Numerator: Number of children in the denominator who received at least one well-child visit with a PCP during the measurement year. Denominator: Number of children aged 3-6 years as of Dec 31st of the measurement year.	W34	33	NCQA/HEDIS	CHIPRA NQF #1516 EPSDT/BF CMMI
Well-Child Visits Well-child visits for 7-11 years of age PROCESS MEASURE	Numerator: Number of children in the denominator who received at least one well-child visit with a PCP during the measurement year. Denominator: Number of children aged 7-11 years of age as of Dec 31st of the measurement year.		34		EPSDT/BF
Well-Child Visits Adolescent well-child visits PROCESS MEASURE	Numerator: Number of children in the denominator with at least one comprehensive well-child visit with a PCP or an OB/GYN practitioner during the measurement year. Denominator: Number of adolescents 12-21 years of age as of Dec 31st of the measurement year.	AWC	35	NCQA/HEDIS	CHIPRA EPSDT/BF

¹ In the CHIPRA 2013 Child Core Set Technical Specifications and Resource Manual, measure numbers were replaced with measure acronyms. These acronyms align with HEDIS measure acronyms, where applicable. A list of former CHIPRA measure numbers and corresponding CHIPRA measure acronyms can be found at the end of this measure table.

² MaineCare-specific (Statewide and Practice-level) rates for this group of measures can be calculated using claims-based data (MIHMS). Statewide MaineCare rates: Include only those individuals with continuous enrollment per CHIPRA Specifications.

Measure	Operational Definition Numerator/Denominator	CHIPRA ¹	IHOC #	Measure Steward	Alignment
WELL CHILD VISITS & ACCESS TO CARE					
Access to Care Children and Adolescent Access to Primary Care Practitioners PROCESS MEASURE	Numerator: Number of children who had at least a visit with a primary care physician. Calculate rates for each denominator age range: a) 12-24 months b) 25 months-6 years of age c) 7-11 years of age d) 12-19 years of age Denominator³: Number of children who fall into the following age groups as of December 31 of measurement year: a) 12-24 months b) 25 months-6 years of age c) 7-11 years of age d) 12-19 years of age	CAP	45	NCQA/HEDIS	CHIPRA

³ For MaineCare rates, apply CHIPRA continuous enrollment and measurement year specifications (include measurement year for 12-24 months & 25 months-6 years; include measurement year and year prior to measurement year for 7-11 years & 12-19 years).

Measure	Operational Definition Numerator/Denominator	CHIPRA ¹	IHOC #	Measure Steward	Alignment
IMMUNIZATIONS⁴					
Immunizations Childhood Immunization Status	Numerator⁵: Number of children in denominator who received the following vaccines on or before their 2nd birthday: 4 DTaP (diphtheria-tetanus-acellular pertussis) 3 IPV (inactivated polio vaccine) 1 MMR (measles-mumps- rubella) 3 Hib ⁶ (Haemophilus influenzae type B) 3 Hep B (hepatitis B) 1 VZV (varicella) 4 PCV (pneumococcal conjugate vaccine) 1 Hep A ⁷ (hepatitis A) 2 or 3 RV ⁸ (rotavirus) 2 Influenza (seasonal flu)	CIS	1	NCQA/HEDIS	CHIPRA MU NQF #0038 EPSDT/BF CMMI
PROCESS MEASURE	Denominator: The number of children who turn 2 years of age during the measurement year.				
Immunizations Immunizations by 6 Years of Age	Numerator⁹: Number of children in the denominator who received the following vaccine doses on or before their 6th birthday: 2 MMR (measles-mumps-rubella) 2 VZV (varicella) 5 DTaP (diphtheria-tetanus-acellular pertussis) 4 IPV (inactivated polio vaccine) ¹⁰		2		EPSDT/BF Based on ACIP guidelines
PROCESS MEASURE	Denominator: Number of children who turn 6 years of age during the measurement year.				

⁴ **Practice-level Rates:** For information about how to generate practice-level rates for quality improvement activities using data from the State of Maine's immunization registry, ImmPact, please contact the Maine Immunization Program at impact.support@maine.gov

⁵ This measure calculates a rate for each vaccine and nine combination rates.

⁶ Stage 1 Meaningful Use (2011-2013) required 2 HiB doses whereas CHIPRA required 3 HiB doses. Stage 2 Meaningful Use (effective 2014) requires 3 HiB doses.

⁷ CHIPRA and Stage 1 Meaningful Use (2011-2013) both required 2 Hep A doses. CHIPRA 2013 and Stage 2 Meaningful Use (effective 2014) now both require only 1 Hep A dose.

⁸ "2 or 3 RV" can be 2 doses of 2-dose RV OR 1 dose of 2-dose RV plus 2 doses of 3-dose RV OR 3 doses of 3-dose RV.

⁹ This measure calculates a rate for each vaccine and a combination rate.

¹⁰ ImmPact counts 4 DTaP and 3 doses IPV as clinically up to date if booster shots are given at clinically recommended times.

Measure	Operational Definition Numerator/Denominator	CHIPRA ¹	IHOC #	Measure Steward	Alignment
IMMUNIZATIONS¹¹					
Immunizations Immunizations for Adolescents PROCESS MEASURE	Numerator¹²: Number of adolescents in the denominator who received the following vaccine doses: 1 MCV (meningococcal conjugate vaccine) on or between their 11 th and 13 th birthdays 1 Tdap (tetanus-diphtheria-acellular pertussis booster) OR 1 Td (tetanus-diphtheria booster) on or between their 10 th and 13 th birthdays Denominator: Number of adolescents who turn 13 years of age during the measurement year	IMA	3	NCQA/HEDIS	CHIPRA NQF #1407 EPSDT/BF
Immunizations¹³ Human Papillomavirus (HPV) Vaccine for Female and Male Adolescents PROCESS MEASURE	Numerator: Number of adolescents in the denominator who received the following vaccine doses on or between their 9th and 13th birthdays: 3 HPV (human papillomavirus vaccine) ¹⁴ Denominator: Number of female or male adolescents who turn 13 years of age during the measurement year.	HPV	4	NCQA/HEDIS	CHIPRA NQF #1959 EPSDT/BF
Immunizations Influenza Immunization Status PROCESS MEASURE	Numerator: Number of children in the denominator who received an influenza immunization OR who reported previous receipt of an influenza immunization. Denominator: Number of children aged 6 months and older who are seen for a visit between Oct 1 and Mar 31.		55	AMA-PCPI	MU NQF #0041 ACO #14

¹¹ **Practice-level Rates:** For information about how to generate practice-level rates for quality improvement activities using data from the State of Maine's immunization registry, ImmPact, please contact the Maine Immunization Program at immimpact.support@maine.gov

¹² The measure calculates a rate for each vaccine and a combination rate.

¹³ **CHIPRA Rates:** Compute rate for females only. **IHOC Rates:** Compute separate rates for females and males.

¹⁴ Must be at least three doses with different dates of service. HPV vaccines administered prior to the 9th birthday cannot be counted.

Measure	Operational Definition Numerator/Denominator	CHIPRA ¹	IHOC #	Measure Steward	Alignment
DEVELOPMENTAL and AUTISM SCREENING¹⁵					
Developmental Screening Developmental Screening in the First Three Years of Life PROCESS MEASURE	Numerator: Number of children in the denominator who were screened for risk of developmental, behavioral, and social delays using a standardized tool ¹⁶ : a) On or by their 1st birthday b) After their 1st birthday and on or by their 2nd birthday c) After their 2nd birthday and on or by their 3rd birthday Denominator¹⁷: Number of children who turned: a) 1 year of age during the measurement year b) 2 years of age during the measurement year c) 3 years of age during the measurement year	DEV	8	Oregon Health and Science University NCQA	CHIPRA NQF #1448 EPSDT/BF
Developmental Screening Autism Screening in the First Three Years of Life PROCESS MEASURE	Numerator: Number of children in the denominator who were screened for autism using a standardized tool ¹⁸ : a) On or by their 2nd birthday b) After their 2nd birthday and on or by their 3rd birthday Denominator¹⁹: Number of children who turned: a) 2 years of age b) 3 years of age <i>NOTE: Autism-specific tools not included in CHIPRA DEV</i>		9		EPSDT/BF

¹⁵ MaineCare specific (Statewide and Practice-level) rates for this group measures is being tested using claims data (MIHMS). Practice level rates for First STEPS Phase II were generated via chart review.

¹⁶ MaineCare uses CPT code 96110 without a modifier for general developmental screening. Parents' Evaluation of Developmental Status (PEDS) and Ages and Stages Questionnaire (ASQ) are examples of standardized tools that qualify.

¹⁷ CHIPRA specifies the denominator is based on members who have their 1st, 2nd, or 3rd birthdays between January 1st and December 31st of the measurement year. Statewide MaineCare rates: Include only those with continuous enrollment per CHIPRA specifications. Practice-level rates: May limit to those children who were seen for a WCV or other PCP visit in the previous 12 months.

¹⁸ MaineCare uses CPT codes 96110 HI for MCHAT R and 96111 HK for MCHAT F. Target is screening at 18-24 months WCV, but tools are validated for children 16 to 30 months.

¹⁹ Statewide MaineCare rates: Include only those with continuous enrollment per CHIPRA specifications. Practice-level reporting: May limit children to those who were seen for a WCV or other PCP visit in the previous 12 months.

Measure	Operational Definition Numerator/Denominator	CHIPRA ¹	IHOC #	Measure Steward	Alignment
HEALTHY WEIGHT^{20,21}					
Healthy Weight Body Mass Index Assessment for Children/Adolescents PROCESS MEASURE OUTCOME MEASURE (w/BMI stratification)	Numerator: Number of children in the denominator who had evidence of Body Mass Index (BMI) documentation during the measurement year. Calculate rates for each denominator age range: a) 3 to 11 years of age (includes children ages 3 to <12 years) b) 12 to 17 years of age (includes children ages 12 to <18 years) c) 3 to 17 years of age (includes children ages 3 to <18 years) Denominator: Number of children who had an outpatient visit with a PCP or OB-GYN during the measurement year and who were: a) 3 to 11 years of age (includes children ages 3 to <12 years) b) 12 to 17 years of age (includes children ages 12 to <18 years) c) 3 to 17 years of age (includes children ages 3 to <18 years)		5	NCQA/HEDIS	EPSDT/BF ²² CMMI
Healthy Weight Weight assessment and counseling on nutrition and physical activity for children and adolescents PROCESS MEASURE	Numerator: Number of children in the denominator who had evidence of the following during the measurement year: HEDIS—Body Mass Index (BMI), counseling for nutrition, & counseling for physical activity; IHOC—Body Mass Index (BMI) and counseling for nutrition and physical activity (<i>Let's Go</i>). Calculate rates for each denominator age range (HEDIS and IHOC): a) 3 to 11 years of age (includes children ages 3 to <12 years) b) 12 to 17 years of age (includes children ages 12 to <18 years) c) 3 to 17 years of age (includes children ages 3 to <18 years) Denominator: Number of children who had an outpatient visit with a PCP or OB-GYN during the measurement year and who were (HEDIS and IHOC): a) 3 to 11 years of age (includes children ages 3 to <12 years) b) 12 to 17 years of age (includes children ages 12 to <18 years) c) 3 to 17 years of age (includes children ages 3 to <18 years)	WCC	6	NCQA/HEDIS	CHIPRA MU NQF #0024 EPSDT/BF ²³

²⁰ IHOC #5 and #6: Practice-level rates for First STEPS Phase III generated via chart review and HER/health system registry data. MaineCare-specific, Statewide rates for IHOC #6 being tested via claims data (MIHMS).

²¹ IHOC: Also report BMI classification Number of children in the denominator with BMI of < 5%; 5-84%; 85-94%; 95-98% and > 99%. Calculate rates by age as above. Based on NCQA/HEDIS measure WCC but does not include counseling, includes BMI documentation only.

²² Measure only captures screening beginning at age 3. Note that Bright Futures/AAP recommends screening for BMI beginning at 24 months.

²³ CMS released the Meaningful Use Stage 2 measures (effective in 2014) in October 2012 with the following modifications to NQF #0024: Changed patient age criteria to 3 – 17 years (from 2 – 17 years), and added the patient's height and weight (in addition to BMI percentile) to the numerator criteria. Bright Futures/AAP recommends screening for BMI beginning at 24 months. Measure only captures screening beginning at age 3.

Measure	Operational Definition Numerator/Denominator	CHIPRA ¹	IHOC #	Measure Steward	Alignment
ORAL HEALTH					
Oral Health²⁴ Oral health risk assessment PROCESS MEASURE	Numerator: Number of children in the denominator who have had an oral health risk assessment. ²⁵ Calculate separate rates for each denominator age range: a) 6 months to <12 months b) 12 months to <24 months c) 24 months to <36 months old d) 6 months to <36 months old Denominator: Number of children who had a WCV/other primary care visit during the measurement year and who were: a) 6 months to <12 months old b) 12 months to <24 months old c) 24 months to <36 months old d) 6 months to <36 months old		14		EPSDT/BF From the First Tooth
Oral Health²⁶ Oral health risk assessment PROCESS MEASURE	Numerator: Number of children in the denominator who have had an oral health risk assessment ²⁷ classified as either high/moderate or low risk. Calculate separate rates for each denominator age range: a) 6 months to <12 months b) 12 months to <24 months c) 24 months to <36 months d) 6 months to <36 months Denominator: Number of children who had an oral health risk assessment during the measurement year and who were: a) 6 months to <12 months old b) 12 months to <24 months old c) 24 months to <36 months old d) 6 months to <36 months old		58		EPSDT/BF From the First Tooth

²⁴ MaineCare-specific (Statewide and Practice-level) rates can be calculated using claims-based data (MIHMS). Statewide MaineCare rates: Include only those with continuous enrollment per CHIPRA specifications.

²⁵ Children covered by MaineCare who do not have a dental home and who are under age 3 years are allowed two oral health risk assessments per year. As of August 1st, 2014 medical providers are now able to bill for this service using the code D0145 (Oral Evaluation for Children under 3 Years of Age).

²⁶ MaineCare-specific (Statewide and Practice-level) rates can be calculated using claims-based data (MIHMS). Statewide MaineCare rates: Include only those with continuous enrollment per CHIPRA specifications.

²⁷ Children covered by MaineCare who do not have a dental home and who are under age 3 years are allowed two oral health risk assessments per year. As of August 1, 2014, both medical and dental providers can bill for this service using the code D0145 (Oral Evaluation for Children under 3 Years of Age).

Measure	Operational Definition Numerator/Denominator	CHIPRA ¹	IHOC #	Measure Steward	Alignment
ORAL HEALTH					
Oral Health Documentation of a dental home OUTCOME MEASURE	Numerator: Number of children in the denominator with documentation of dental home ²⁸ completed in the previous 12 months and classified as Does Have a Dental Home or Does Not Have a Dental Home. Calculate separate rates for each denominator age range: a) 6 months to <12 months b) 12 months to <24 months c) 24 months to <36 months d) 36 months to <48 months (<4 years old) e) 6 months to <48 months (<4 years old) Denominator: Number of children who had a WCV/other primary care visit during the measurement year and who were: a) 6 months to <12 months old b) 12 months to <24 months old c) 24 months to <36 months old d) 36 months to <48 months (<4 years old) e) 6 months to <48 months (<4 years old)		15		EPSDT/BF From the First Tooth
Oral Health²⁹ Children with fluoride varnish PROCESS MEASURE	Numerator: Number of children in the denominator with fluoride varnish by a non-dental provider. ³⁰ Calculate separate rates for each denominator age range: a) 6 months to <12 months b) 12 months to <24 months c) 24 months to <36 months d) 36 months to <48 months (<4 years old) e) 6 months to <48 months (<4 years old) Denominator³¹: Number of children seen for a well-child visit/other primary care visit during the measurement year and who were: a) 6 months to <12 months old b) 12 months to <24 months old c) 24 months to <36 months old d) 36 months to <48 months (<4 years old) e) 6 months to <48 months (<4 years old)		16		EPSDT/BF From the First Tooth

²⁸ On Maine's Oral Health Risk Assessment (OHRA) form, having a dental home is indicated by a "Yes" answer to "Has the child seen a dentist in the past 12 months?"

²⁹ MaineCare-specific (Statewide and Practice-level) rates can be calculated using claims-based data (MIHMS). Statewide MaineCare rates: Include only those with continuous enrollment per CHIPRA specifications.

³⁰ MaineCare uses the following oral health billing codes: D1206 for fluoride varnish, D1208 for topical fluoride, D0145 for Oral Evaluation of a Child Under Age 3.

³¹ Exclude children who have a dental home from denominators. On Maine's Oral Health Risk Assessment (OHRA) form, having a dental home is indicated by a "Yes" answer to "Has the child seen a dentist in the past 12 months?" In Maine, children without a dental home are considered to be at moderate to high risk for dental caries.

Measure	Operational Definition Numerator/Denominator	CHIPRA ¹	IHOC #	Measure Steward	Alignment
ORAL HEALTH					
Oral Health³² Percentage of Eligibles That Received Preventive Dental Services PROCESS MEASURE	Numerator: Number of children in the denominator receiving preventive dental services defined by HCPC codes D1000 - D1999 (ADA codes D1000 - D1999) Denominator: Number of children shown on line 12b of the CMS-416 Form which represents the total unduplicated number of all individuals age 1 < 21 years determined to be eligible for EPSDT services. a) 6 months to <48 months old (IHOC) b) 1 year to <21 years (CHIPRA)	PDENT	38	Centers for Medicare & Medicaid Services	CHIPRA EPSDT/BF
Oral Health³³ Children with fluoride varnish PROCESS MEASURE	Numerator: Number of children in the denominator who had at least 4 fluoride varnish (D1206) and/or Topical Fluoride (D1208) applications before their 4th birthday in any setting. Denominator: Number of children who were < 48 months during the measurement year		56		From the First Tooth
Oral Health Dental Sealants for 6-9 Year Old Children at Elevated Caries Risk PROCESS MEASURE	Numerator: The unduplicated number of eligible children ages 6 to 9 at “elevated” risk for dental caries (i.e. “moderate” or “high” risk) who received a sealant on a permanent first molar tooth as a dental service. Denominator: The unduplicated number of eligible children ages 6 to 9 at “elevated” risk for dental caries (i.e., “moderate” or “high” risk).	SEAL-CH	59	American Dental Association on behalf of the Dental Quality Alliance	NQF #2508

³² MaineCare-specific (Statewide and Practice-level) rates can be calculated using claims-based data (MIHMS) based on continuous enrollment per CHIPRA specifications. Unduplicated means each child is counted only once for the purposes of this line if multiple services were received. CHIPRA measure limited to ages 1 - <21.

³³ MaineCare-specific (Statewide and Practice-level) rates for this measure can be calculated using claims-based data (MIHMS). Statewide MaineCare rates: Include only those with 12 months continuous enrollment consistent with other CHIPRA specifications. For practice-level rates, include children who were seen for a WCV or other primary care visit during the measurement year.

Measure	Operational Definition Numerator/Denominator	CHIPRA ¹	IHOC #	Measure Steward	Alignment
HEARING and VISION³⁴					
Hearing Newborn hearing screen and audiologic evaluation ³⁵ PROCESS MEASURE	Numerator: a) Number of infants in the denominator who received a hearing screen prior to 1 month of age. b) Number of infants in the denominator who had an audiologic evaluation by 3 months of age. Denominator: a) Number of infants born during the measurement year b) Number of infants born during the measurement year who did not pass the newborn hearing test at 1 month of age and who had a WCV at 4 months of age.		52		EPSDT/BF USPSTF
Hearing Hearing test prior to age 6 PROCESS MEASURE	Numerator: Number of children in denominator who had at least one hearing test recorded in the chart. Denominator: Number of children who had a WCV/other primary care visit and who were active patients in the practice since their 4th birthday and who turned 6 years of age.		11		EPSDT/BF Based on 2010 CMS Priority Area
Vision Vision test, ages 3– 6 years PROCESS MEASURE	Numerator: Number of children in the denominator who had a documented visual acuity test: a) By their 3rd birthday b) After their 3rd birthday and on or by their 4th birthday c) After their 4th birthday and on or by their 5th birthday d) After their 5th birthday and on or by their 6th birthday Denominator: Number of children who had a WCV/other PCP visit during the measurement year and who turned: a) 3 years of age b) 4 years of age c) 5 years of age d) 6 years of age		12		Based on 2010 CMS Priority Area
Vision³⁶ Vision test, by age 6 PROCESS MEASURE	Numerator: Number of children in the denominator who had a documented visual acuity test. Denominator: Number of children who had a WCV/other PCP visit during the measurement year and who were active patients in the practice since their 3rd birthday and who turned 6 years of age.		13		EPSDT/BF

³⁴ Data sources for Statewide and Practice-level rates for this group of measures are not yet identified.

³⁵ Universal newborn hearing tests are currently reported in the CHILDLINK program. The challenge is how to capture the children who do not pass the test and need to get an audiologic examination by 3 months of age and to coordinate follow-up with the infant's medical home.

³⁶ Based on USPSTF guidelines and 2010 CMS Priority Areas.

Measure	Operational Definition Numerator/Denominator	CHIPRA ¹	IHOC #	Measure Steward	Alignment
LEAD³⁷ and ANEMIA^{38, 39}					
Lead Lead risk assessment questionnaire ⁴⁰ completed for children 3 years of age and under. PROCESS MEASURE	Numerator: Number of children in denominator who had at least a) ONE lead risk assessment questionnaire completed between their 1st and 2nd birthdays. b) ONE lead risk assessment questionnaire completed after their 2nd birthday and on or by their 3rd birthday. c) TWO lead risk assessment questionnaires completed on or by their 3rd birthday. Denominator: Number of children who had a well-child visit/primary care visit during the measurement year and who turned: a) 2 years of age b) 3 years of age c) 3 years of age		17		EPSDT/BF MCLPPP ⁴¹ Maine Lead Poisoning Control Act (Title 2, Ch. 252)
Lead Blood lead test completed for children 3 years of age and under. PROCESS MEASURE	Numerator: Number of children in the denominator who had at least a) ONE lead test completed between their 1st and 2nd birthdays. b) ONE lead test completed after their 2nd birthday and on or by their 3rd birthday. c) TWO lead tests completed on or by their 3rd birthday. Denominator: Number of children who had a well-child visit/primary care visit during the measurement year and who turned: a) 2 years of age b) 3 years of age c) 3 years of age		18	CMS 416	EPSDT/BF MCLPPP Maine Lead Poisoning Control Act (Title 2, Ch. 252)
Anemia Anemia tests completed between the ages of 1 and 2 years and 2 and 3 years. PROCESS MEASURE	Numerator: Number of children in the denominator who had a hemoglobin/hematocrit (H/H) completed during the measurement year: a) Between their 1st and 2nd birthdays. b) After their 2nd birthday and on or by their 3rd birthday. Denominator: Number of children enrolled in MaineCare during the measurement year and who turned: a) 2 years of age b) 3 years of age		22		EPSDT/BF Based on WIC guidelines

³⁷ For statewide MaineCare rates, only include MaineCare-Enrolled children.

³⁸ IHOC #17, 18, and 19: Practice-level rates for First STEPS Phase II generated via chart review. IHOC #18: MaineCare-specific, Statewide rates generated via claims data (MIHMS). IHOC# 17 and 22: Data source for Statewide rates not yet identified.

³⁹ IHOC #17, 18, and 19: Practice-level rates can be generated via EMR or chart review. IHOC #18: MaineCare-specific, Statewide rates generated via claims data (MIHMS). IHOC# 17 and 22: Data source for Statewide rates not yet identified.

⁴⁰ Use the following lead risk questionnaire to determine a child's level of risk at 12 mo and 24 mo of age: **a.** Does your child spend more than 10 hours per week in any house built before 1950? **b.** Does your child spend more than 10 hours per week in any house built before 1978 that was renovated or remodeled within the past 6 mo? **c.** Does your child spend time with an adult whose job exposes him or her to lead? (e.g., construction, painting, metalwork) **d.** Is your child enrolled in MaineCare? (All children with MaineCare need a blood lead test performed.) If the parent answers "yes" or "I don't know" to any of these questions, a blood lead test should be performed. In addition to testing children on the basis of risk, consider testing for lead exposure in: **e.** Children diagnosed with pica, developmental delays, behavioral problems or ADHD **f.** Children presenting with unexplained illness such as severe anemia, lethargy or abdominal pain.

⁴¹ MCLPPP is the Maine Childhood Lead Poisoning Prevention Program at the State of Maine's Centers for Disease Control

Measure	Operational Definition Numerator/Denominator	CHIPRA ¹	IHOC #	Measure Steward	Alignment
ASTHMA ^{42, 43}					
Asthma Assessment and classification PROCESS MEASURE	Numerator: Number of children in denominator with a diagnosis of asthma who were evaluated within 12 months for the frequency (numeric) of daytime and nocturnal asthma symptoms. ⁴⁴ Denominator: Number of children with asthma between the ages of 2 and < 19 years who have been under the care of the participating practice for at least 24 months.		23	AMA-PCPI	CMMI BTE ⁴⁵ Formerly endorsed by NQF (#0001)
Asthma Lung function testing PROCESS MEASURE	Numerator: Number of children in the denominator who have had spirometry completed at least once in the last 24 months. Denominator: Number of children with asthma between the ages of 5 and < 19 years who have been under the care of the participating practice for at least 24 months.		24		BTE ⁴⁶ NHLBI Guidelines ⁴⁷
Asthma Medication Management for People with Asthma PROCESS MEASURE	Numerator: Number of children in the denominator who remained on asthma medications for the measurement year for 1) at least 50 percent of their treatment period and 2) at least 75 percent of their treatment period. Denominator: Members 5-20 years of age who were identified as having persistent asthma and who were dispensed appropriate medications. Also calculate rates for age stratifications: 5-11, 12-18, 19-20, 5-20.	MMA	25	NCQA/HEDIS	NQF #1799

⁴² Priority measures for measures for Maine Health Management Coalition's Pathways to Excellence Program. IHOC# 23, 24, 26, 27, 28, 29: Data source for Statewide rates is yet to be identified. IHOC # 23, 24, 25, 26, 27, 28, 29: Practice-level rates for Pathways to Excellence reporting generated via chart review or EMR/health system registry. IHOC# 25: MaineCare-specific, Statewide rates generated via claims data (MIHMS).

⁴³ Priority measures for measures for Maine Health Management Coalition's Pathways to Excellence Program. IHOC# 23, 24, 26, 27, 28, 29: Data source for Statewide rates is yet to be identified. IHOC #23, 24, 25, 26, 27, 28, 29: Practice-level rates for Pathways to Excellence reporting generated via chart review or EMR/health system registry. IHOC# 25: MaineCare-specific, Statewide rates generated via claims data (MIHMS).

⁴⁴ Validated asthma control tests: Test for Respiratory & Asthma Control in Kids (TRACK, for children 2 < 4 years of age); Asthma Control Test (ACT, for children ≥ 4 years of age)

⁴⁵ Adapted from BTE measure which assesses asthma patient 5-75, modified age range to just assess children 5 to <19 years.

⁴⁶ Adapted from BTE measure which assesses asthma patient 5-75, modified age range to just assess children 5 to <19 years.

⁴⁷ NHLBI 2007 Guidelines: The Expert Panel recommends the following frequencies for spirometry measurements: (1) at the time of initial assessment (Evidence C); (2) after treatment is initiated and symptoms and PEF have stabilized, to document attainment of (near) "normal" airway function; (3) during a period of progressive or prolonged loss of asthma control; and (4) at least every 1–2 years to assess the maintenance of airway function (Evidence B, extrapolation from clinical trials). Spirometry may be indicated more often than every 1–2 years, depending on the clinical severity and response to management (Evidence D). These spirometry measures should be followed over the patient's lifetime to detect potential for decline and rate of decline of pulmonary function over time (Evidence C).

Measure	Operational Definition Numerator/Denominator	CHIPRA ¹	IHOC #	Measure Steward	Alignment
ASTHMA⁴⁸					
Asthma Use of Appropriate Medications for People with Asthma PROCESS MEASURE	Numerator: a) Meaningful Use: Number of patients in the denominator who were appropriately prescribed controller medication during the measurement year. b) Pathways To Excellence: Number of children in the denominator who were appropriately prescribed controller medication within the last 12 months. Denominator: a) Meaningful Use: Patients age 5 to 64 years of age with persistent asthma and a visit during measurement year. Also calculate rates for age stratifications 5-11, 12–18, 19-64. b) Pathways To Excellence: Children between the ages of 2 and <19 years who have been under the care of the participating practice for at least 24 months and have a documented diagnosis of persistent asthma.		61	NCQA/HEDIS	MU BTE ⁴⁹ NQF #0047 ⁵⁰
Asthma Influenza Vaccination PROCESS MEASURE	Numerator: Number of children in the denominator who had a flu shot within the last 12 months. Denominator: Number of children with asthma between the ages of 2 and <19 years who have been under the care of the participating practice for at least 24 months.		26		BTE ⁵¹ NHLBI Guidelines
Asthma Patient Self-Management Plan PROCESS MEASURE	Numerator: Number of children in the denominator with a written asthma action plan updated within the past 12 months. Denominator: Number of children with asthma between the ages of 2 and <19 years who have been under the care of the participating practice for at least 24 months.		27		BTE ⁵² NHLBI Guidelines
Asthma Tobacco Exposure ⁵³ and Use PROCESS MEASURE	Numerator: Number of children in denominator: a) ages 2 and <19 years with documentation of tobacco exposure and; b) ages 10 and <19 years assessed for tobacco use within the last 12 months. Denominator: Number of children with asthma between the ages of 2 and <19 years who have been under the care of the participating practice for at least 24 months.		28		BTE ⁵⁴

⁴⁸ Priority measures for measures for Maine Health Management Coalition’s Pathways to Excellence Program. IHOC# 23, 24, 26, 27, 28, 29: Data source for Statewide rates is yet to be identified. IHOC #23, 24, 25, 26, 27, 28, 29: Practice-level rates for Pathways to Excellence reporting generated via chart review or EMR/health system registry. IHOC# 25: MaineCare-specific, Statewide rates generated via claims data (MIHMS).

⁴⁹ Adapted from BTE measure which assesses asthma patient 5-75, modified age range to just assess children 5 to <19 years.

⁵⁰ Updated from NQF #0036 to NQF #0047: “; includes ages 5 – 64.

⁵¹ Adapted from BTE measure which assesses asthma patient 5-75, modified age range to just assess children 5 to <19 years.

⁵² Adapted from BTE measure which assesses asthma patient 5-75, modified age range to just assess children 5 to <19 years.

⁵³ Tobacco exposure is defined as someone who uses tobacco who lives in the household or is a primary caregiver.

⁵⁴ Measure adapted from the BTE measure for adults 5-75, modified age range to 2 to <19 to make the measure pediatric specific. Follows NQF #0028 (Meaningful Use, CMMI, and ACO #17) and includes assessment of tobacco use status AND cessation advice and Treatment.

Measure	Operational Definition Numerator/Denominator	CHIPRA ¹	IHOC #	Measure Steward	Alignment
ASTHMA⁵⁵					
Asthma Patient Body Mass Index PROCESS MEASURE	Numerator: Number of children in denominator who have evidence of Body Mass Index (BMI) percentile documentation within the last 12 months. Denominator: Number of children between the ages of 2 and <19 years who have been under the care of the participating practice for at least 24 months and have a documented diagnosis of asthma.		29		BTE ⁵⁶
Asthma Annual Percentage of Asthma Patients with One or More Asthma-Related Emergency Room (ER) Visits ⁵⁷ OUTCOME MEASURE	Numerator: Number of children in the denominator who had at least 1 ER visit(s) during the measurement year (March 1 through February 28th) where the primary diagnosis assigned on the claim was asthma. Denominator: Number of children age 2 - <21 years diagnosed with asthma during the measurement year.		42		NQF #1381 ⁵⁸

⁵⁵ Priority measures for measures for Maine Health Management Coalition's Pathways to Excellence Program. IHOC# 23, 24, 26, 27, 28, 29: Data source for Statewide rates is yet to be identified. IHOC #23, 24, 25, 26, 27, 28, 29: Practice-level rates for Pathways to Excellence reporting generated via chart review or EMR/health system registry. IHOC# 25: MaineCare-specific, Statewide rates generated via claims data (MIHMS).

⁵⁶ Adapted from BTE measure which assesses patient 5-75, modified age range to just assess children 2 to <19 years.

⁵⁷ *Not* included in Maine Health Management Coalition's Pathways to Excellence Program.

⁵⁸ Retired by CHIPRA 12/2013 for lack of steward but ME CHIP voted to keep on IHOC list due to clinical significance.

Measure	Operational Definition Numerator/Denominator	CHIPRA ¹	IHOC #	Measure Steward	Alignment
DIABETES⁵⁹					
Diabetes Annual Pediatric Hemoglobin (HbA1c) Testing PROCESS MEASURE	Numerator: Number of patients in the denominator sample who have documentation of date and result for the most recent HbA1c test during the 12-month reporting period. Denominator: A systematic sample of patients, ages 5-17 years with a diagnosis of diabetes and/or notation of prescribed insulin/oral hypoglycemic/antihyperglycemics for at least 12 months. This is defined by documentation of a face-to-face visit for diabetes care between the physician and patient that predates the most recent visit by at least 12 months.		43	NCQA	MU NQF #0060 ⁶⁰
WOMEN'S HEALTH and PERINATAL CARE⁶¹					
Chlamydia Screening for Women PROCESS MEASURE	Numerator: The number of women in the denominator who had at least one chlamydia test during the measurement year. Denominator: Number of women 16-20 years of age as of Dec 31st of the measurement year who were identified as sexually active.	CHL	37	NCQA/HEDIS	CHIPRA MU NQF #0033 ⁶²
Behavioral Health Risk Assessment for Pregnant Women PROCESS MEASURE	Numerator: Number of those in the denominator who received a behavioral health screening risk assessment at the first prenatal visit that includes the following screenings: Depression, alcohol use, tobacco use, drug use, and intimate partner violence. Denominator: Number of patients (regardless of age) who gave birth during a 12 month period and were seen at least once for prenatal care.	BHRA	53	AMA-PCPI	CHIPRA ⁶³
Prenatal Care Frequency of Ongoing Prenatal Care OUTCOME MEASURE	Numerator: Number of women in the denominator who had an unduplicated count of less than 21%, 21-40%, 41-60%, 61-80%, or more than 81% of expected visits, adjusted for the month of pregnancy at enrollment and gestational age. Denominator: Number of women who delivered a live birth between Nov 6 of the year prior to measurement year & Nov 5 of the measurement year. For MaineCare rates, apply CHIPRA continuous enrollment specifications: 43 days prior to delivery through 56 days after delivery. No age specifications for the mother but data can be reported separately for adolescents.	FPC	46	NCQA/HEDIS	CHIPRA NQF #1391 CMMI

⁵⁹ MaineCare-specific, Statewide and Practice-level rates are generated via claims data (MIHMS).

⁶⁰ Retired by CHIPRA 12/2013 for small N but ME CHIP voted to keep on IHOC list due to clinical significance.

⁶¹ IHOC#37: MaineCare-specific, Statewide and Practice-level rates are generated via claims data (MIHMS). IHOC#53: Data source for Statewide and Practice-level rates not yet identified. IHOC#46, 47, 48, 49: MaineCare-specific, Statewide rates generated via state registry data (birth records); data source for Practice-level rates not yet identified.

⁶² Meaningful Use and NQF measures assess screening rates for 16 -24 year olds.

⁶³ Per CMS, this measure captures information about quality of care for both mother and child, and addresses topics not otherwise included in the CHIPRA Initial Core Set of Child Health Care Measures.

Measure	Operational Definition Numerator/Denominator	CHIPRA ¹	IHOC #	Measure Steward	Alignment
WOMEN'S HEALTH and PERINATAL CARE⁶⁴					
Prenatal Care Timeliness of Prenatal Care OUTCOME MEASURE	Numerator: Number of women in the denominator sample who had a prenatal visit in the first trimester or within 42 days of enrollment. Denominator⁶⁵: Number of women ⁶⁶ who delivered a live birth between Nov 6 of the year prior to measurement year & Nov 5 of the measurement year.	PCC	47	NCQA/HEDIS	CHIPRA NQF #1517 (includes post-partum care)
Live Births Weighing Less than 2,500 Grams OUTCOME MEASURE	Numerator: Number of resident live births less than 2,500 grams during the reporting period with Medicaid/CHIP as the payer source. Denominator: Number of resident live births ⁶⁷ during the reporting period with Medicaid/CHIP as the payer source.	LBW	48	CDC (National Center for Health Statistics)	CHIPRA
Cesarean Rate for Nulliparous Singleton Vertex OUTCOME MEASURE	Numerator: Number of women in the denominator who had a cesarean birth. Denominator: Number of first live singleton births [nulliparous term singleton (NTSV) births] at or beyond 37 weeks of gestation and with vertex or cephalic presentation (no breech or transverse fetal positions).	CSEC	49	CMQCC	CHIPRA NQF #0471
AMBULATORY and ACUTE CARE⁶⁸					
Ambulatory Care Emergency Department (ED) OUTCOME MEASURE	Numerator: Number of ED visits for children in the denominator. Denominator: Number of member months = Total number of months enrolled in the program summed across all children. Denominator includes only children < 20 years of age as of the date of service.	AMB	41	NCQA/HEDIS	CHIPRA
Pediatric Central Line-Associated Blood Stream Infections OUTCOME MEASURE	Numerator: Number of catheter-associated blood stream infections identified during the month selected for surveillance. Denominator: Number of central line days during the month selected for surveillance.	CLABSI	50	CDC	CHIPRA NQF #0139

⁶⁴ IHOC#37: MaineCare-specific, Statewide and Practice-level rates are generated via claims data (MIHMS). IHOC#53: Data source for Statewide and Practice-level rates not yet identified. IHOC#46, 47, 48, 49: MaineCare-specific, Statewide rates generated via state registry data (birth records); data source for Practice-level rates not yet identified.

⁶⁵ For MaineCare rates, apply CHIPRA continuous enrollment specifications: 43 days prior to delivery through 56 days after delivery.

⁶⁶ No age specifications for the mother but data can be reported separately for adolescents.

⁶⁷ No age specifications for the mother but data can be reported separately for adolescents.

⁶⁸ IHOC#41 and 42: MaineCare-specific, Statewide rates generated via claims data (MIHMS); data source for Practice-level rates not yet identified. IHOC#50: Statewide rates generated via hospital registry data. IHOC#30: MaineCare-specific, Statewide and Practice-level rates generated via claims data (MIHMS).

Measure	Operational Definition Numerator/Denominator	CHIPRA ¹	IHOC #	Measure Steward	Alignment
BEHAVIORAL HEALTH SCREENING and FOLLOW-UP⁶⁹					
Screening for Clinical Depression PROCESS MEASURE	Numerator: Number of those in the denominator who were screened for clinical depression using a standardized tool, with follow up plan documented. Denominator: Number of patients 12 years of age and older		54	Centers for Medicare and Medicaid Services	MU NQF #0418 ACO #18
ADHD Follow-up Care Follow-up Care for Children Prescribed Attention-Deficit/Hyperactivity Disorder (ADHD) Medication PROCESS MEASURE	Numerator: <u>Initiation Phase:</u> Number of children in the denominator who had at least one follow-up visit with a prescribing practitioner within 30 days after the initiation of medication. <u>Continuation Phase:</u> Number of children in the denominator who had at least two follow-up visits with a prescribing practitioner within the 9 month period after the 30 day Initiation Phase. Denominator: Number of children 6-12 years of age at the start of medication, with an ambulatory prescription dispensed for ADHD medication, who remained on the medication for at least 10 months after starting treatment.	ADD	36	NCQA/HEDIS	CHIPRA MU NQF #0108
Follow-Up After Hospitalization for Mental Illness PROCESS MEASURE	Numerator: Number of children in the denominator with an outpatient visit, intensive outpatient visit, or partial hospitalization with a mental health practitioner within: a) 7 days after discharge b) 30 days after discharge Denominator: Number of children age 6 to < 21 years who were hospitalized for treatment of selected mental health disorders and discharged. Continuous enrollment date of discharge through 30 days after discharge.	FUH	44	NCQA/HEDIS	CHIPRA NQF #0576 CMMI
Child and Adolescent Major Depressive Disorder (MDD): Suicide Risk Assessment PROCESS MEASURE	Numerator: Enrollee visits with an assessment for suicide risk. Denominator: All enrollee visits for those enrollees ages 6 through 17 years with a diagnosis of major depressive disorder.	SRA-CH	60	American Medical Association – Physician Consortium for Performance Improvement (AMA-PCPI)	NQF #1365

⁶⁹ IHOC#54: Data sources for Statewide and Practice-level rates not yet identified. IHOC#36 and 44: MaineCare-specific, Statewide and Practice-level rates generated via claims data (MIHMS).

Measure	Operational Definition Numerator/Denominator	CHIPRA ¹	IHOC #	Measure Steward	Alignment
CONSUMER SURVEY⁷⁰					
Consumer Assessment of Healthcare Providers and Systems (CAHPS) Health Plan Survey 5.0h COMPOSITE MEASURE	Numerator: Survey items Denominator: Currently denominator population varies – SNAC recommends collecting all survey data on all children enrolled in Medicaid and CHIP Child version including Medicaid and Children with Chronic Conditions Supplemental Items ⁷¹	CPC	51	NCQA/HEDIS	CHIPRA CMMI

⁷⁰ This measure is a survey.

⁷¹ This measure provides information on parents' experience with their child's health plan. Results summarize member experiences through ratings, composites and individual question summary rates. Topics covered in the survey include: rating of all health care and personal doctor, customer service, getting care quickly, getting needed care, how well doctors communicate, shared decision- making, family centered care, coordination of care for children with chronic conditions, and access to prescription medicines.

Resources

Key Source Documents for the IHOC Master List of Pediatric Measures

CHIPRA Initial Core Set of Children’s Health Care Quality Measures

<http://www.medicaid.gov/Medicaid-CHIP-Program-Information/By-Topics/Quality-of-Care/CHIPRA-Initial-Core-Set-of-Childrens-Health-Care-Quality-Measures.html>

National Committee on Quality Assurance (NCQA) HEDIS Measures

<http://www.ncqa.org/HEDISQualityMeasurement/HEDISMeasures.aspx>

NCQA’s National Quality Forum-endorsed Measures (NQF)

<http://www.qualityforum.org/QPS/>

Agency for Healthcare Research and Quality’s U. S. Health Information Knowledgebase (USHIK) for Meaningful Use Measures

<http://ushik.ahrq.gov/MeaningfulUseMeasures?system=mu>

Bridges to Excellence (BTE) Asthma Clinician Guide and Measures

<http://www.hci3.org/sites/default/files/files/BTE%20Asthma%20Clinician%20Guide%2002.02.2012.pdf>

Early and Periodic Screening, Diagnosis and Treatment (EPSDT) Overview

https://www.cms.gov/medicaidearlyperiodicscrn/01_Overview.asp

American Academy of Pediatrics’ Bright Futures Periodicity Schedule

http://www.aap.org/en-us/professional-resources/practice-support/Periodicity/Periodicity%20Schedule_FINAL.pdf

Advisory Committee on Immunization Practices (ACIP) Recommendations

<http://www.cdc.gov/vaccines/schedules/hcp/child-adolescent.html>

U.S. Preventive Services Task Force (USPSTF) Recommendations

www.uspreventiveservicestaskforce.org/uspstf11/vischildren/vischildrs.htm

Maine Childhood Lead Poisoning Prevention Program (MCLPPP)

<http://www.maine.gov/dhhs/eohp/lead/providers.shtml>

Maine Lead Poisoning Control Act

<http://www.mainelegislature.org/legis/statutes/22/title22ch252.pdf>

Resources

Glossary of IHOC Related Terms and Programs
ACO -CMS measures for Accountable Care Organization initiative. Maine has several sites in state ACO pilot.
Bridges to Excellence (BTE) - BTE is a provider incentive program that recognize and reward clinicians who deliver superior patient care. The programs measure the quality of care delivered in provider practices with an emphasis placed on the effective management of patients with chronic conditions.
CHIP Annual Report - Maine has agreed to report as many CHIPRA measures as possible to CMS on an annual basis through the CHIP Annual Reporting Template System (CARTS).
CHIPRA Measures—Child Health Insurance Program Reauthorization Act Measures - CHIPRA legislation mandated a core set of child health measures to be published and maintained by the Centers for Medicaid and Medicare Services (CMS). CHIPRA measure specifications are based on statewide rates for MaineCare-enrolled members only, and include eligibility requirements that typically look at continuous enrollment during the measurement year. Currently, reporting by States to CMS is voluntary through the CHIP Annual Report.
CMS 416 - Measures included in CMS Form 416 Report. Mandatory reporting by States to CMS, twice annually. Claims-based measure specifications that include only MaineCare-enrolled children and eligibility requirements that look at continuous enrollment during the measurement year.
The Early Periodic Screening, Diagnosis, and Treatment (EPSDT) Program - EPSDT Bright Futures program is the child health component of Medicaid. It's required in every state and is designed to improve the health of low-income children, by financing appropriate and necessary pediatric services. EPSDT is designed to address physical, mental, and developmental health needs. In addition to diagnostic and treatment coverage, screening services to detect physical and mental conditions must be covered at periodic intervals.
First STEPS (FS) - Practice-level reporting for First Steps quality improvement initiative. Not payer-specific but includes all children in the practice. Measures may have been derived from other sources and re-specified for practice-level calculations, including “Active at Practice” guidelines as opposed to “continuous enrollment” requirements.
IHOC Summary Report - A product of the IHOC measures project, produced annually using data generated for the CHIP Annual Report and other measures; includes background information on measure development and explanations of data limitations.
MaineCare Health Homes Initiative (HH) - Part of the State of Maine's Value Based Purchasing Strategy.
Meaningful Use (MU) - Reporting of this measure helps practices fulfill the EHR Incentive Program’s Meaningful Use quality reporting requirements.
Pathways to Excellence (PTE) – Measures adopted by Maine Health Management Coalition’s public reporting program, PTE. Measures may have been derived from other sources and re-specified for practice-level calculations, including “Active at Practice” guidelines as opposed to “continuous enrollment” requirements.
Patient-Centered Medical Home (PCMH) - Maine Health Management Coalition is reporting these measures for the PCMH pilot from the all payer claims data base at Maine Health Data Organization (MHDO).
Primary Care Physician Incentive Payment (PCPIP) - An incentive plan developed by the Division of Health Care Management at MaineCare Services to reward practitioners that provide high quality of care to MaineCare patients.
SIM - Federal State Innovation Model grant awarded to the State of Maine.
Utilization Review Report (UR) - MaineCare reports to providers generated for specific claims-based measures on a semi-annual basis.

Resources

2011 CHIPRA Measure Numbers Replaced with 2013 CHIPRA Measure Acronyms

2011 CHIPRA Number	2013 CHIPRA Acronym	2011 CHIPRA Number	2013 CHIPRA Acronym	2011 CHIPRA Number	2013 CHIPRA Acronym	2011 CHIPRA Number	2013 CHIPRA Acronym
1	PPC	7	WCC	13	PDENT	19	CLABSI
2	FPC	8	DEV	14	CAP	20	ASMER
3	LBW	9	CHL	15	CWP	21	ADD
4	CSEC	10	W15	16	OME	22	PA1C
5	CIS	11	W34	17	TDENT	23	FUH
6	IMA	12	AWC	18	AMB	24	CPC

LIST OF MERGED OR RETIRED IHOC MEASURES		
IHOC #	TITLE	STATUS
7	Developmental Screening at 12 months	Merged with IHOC #8 to align with CHIPRA 8/DEV measure which includes all three age groups (12 months, 24 months, and 36 months).
10	Developmental Screening at 36 months	Merged with IHOC #8 to align with CHIPRA 8/DEV measure which includes all three age groups (12 months, 24 months, and 36 months).
19	Lead risk assessment questionnaire between 24 and 35 months	Merged with IHOC #17 to create one measure with separate age groups for children 3 years of age and under.
20	Blood lead test completed between 24 and 35 months	Merged with IHOC #18 to create one measure with separate age groups for blood lead tests completed by 36 months of age.
21	Two blood lead tests completed by 36 months	Merged with IHOC #18 to create one measure with separate age groups for blood lead tests completed by 36 months of age.
40	Otitis Media with Effusion	CMS retired this CHIPRA measure (#16) in December 2012.
30	Appropriate Testing for Children with Pharyngitis	CMS retired this CHIPRA measure (CWP) in December 2013.
39	Percentage of Eligibles That Received Dental Treatment Services	CMS retired this CHIPRA measure (TDENT) in December 2014.

Resources

Changes from Previous Document Versions

Current Version: IHOC_List_of_Pediatric_Measures_June_2015	
Previous Version: IHOC_List_of_Pediatric_Measures_August_2014	
Changes/Revisions	Applicable IHOC Measure #
Updated month and year of document version.	n/a
Retired IHOC #39 (TDENT-CH) per CMS decision to retire measure from CHIPRA Core List.	39
Added IHOC #59 (SEAL-CH), Dental Sealants for 6-9 Year Old Children at Elevated Caries Risk, per CMS decision to add to CHIPRA Core Set.	59
Added IHOC #60 (SRA-CH), Child and Adolescent Major Depressive Disorder (MDD): Suicide Risk Assessment, per CMS decision to add to CHIPRA Core Set.	60
Changed the name of the Immunization Status for Adolescents measure (IMA) to Immunizations for Adolescents to align with March 2015 CHIPRA Core Set Technical Specifications Manual.	3
Replaced IHOC #44 reference to “intensive outpatient encounter” with “intensive outpatient visit” to align with March 2015 CHIPRA Core Set Technical Specifications Manual.	44
Divided measure into two separate measures to clarify differences between CHIPRA and BTE.	25
Added IHOC #61, Use of Appropriate Medications for People with Asthma, due to separation from IHOC #25.	61
Added reference to NQF measure #1799.	25
Updated reference to NQF measure from #0036 to #0047.	61
Removed incorrect reference to NQF #0173.	41
Previous Changes/Revisions (IHOC_List_of_Pediatric_Measures_October_2013)	Applicable IHOC Measure #
Revised and updated narrative introduction (Overview)	n/a
Updated list of reference links to websites and organizations	n/a

Separated “Measure Steward and Alignment” column into two distinct columns in order to more clearly delineate details about the measure steward versus measure alignment.	all
Reviewed and updated “Measure Steward” and “Measure Alignment” columns	all
Updated foot notes; added/removed footnotes as needed	all
Revised “Measure” column language to match measure steward’s language for measure titles and descriptions	all
Added new rate to IHOC #16 Fluoride Varnish: <i>At least 4 fluoride varnishes by 4 years of age</i>	16
Retired IHOC #30 (CHIPRA CWP) per CMS decision to retire measure from CHIPRA Core List.	30
Updated the “Measure Alignment” column for <i>Annual Pediatric Hemoglobin (HbA1c) Testing</i> and <i>Annual Percentage of Asthma Patients with one or More Asthma-Related ER Visits</i> . Both were CHIPRA Core set measures that were retired but were kept on the IHOC list.	42 & 43