

# Maine IHOC Master List of Pediatric Measures with Numerators and Denominators

---

**October 2013**

<b>Document Overview</b>	<b>Page 1</b>
<b>Links to Source Documents</b>	<b>Page 1</b>
<b>Table of Pediatric Measures by Topic</b>	<b>Page 2</b>
<i>Well Child Visits &amp; Access to Care</i>	<i>Page 2</i>
<i>Immunizations</i>	<i>Page 3</i>
<i>General Developmental &amp; Autism Screening</i>	<i>Page 5</i>
<i>Healthy Weight</i>	<i>Page 6</i>
<i>Oral Health</i>	<i>Page 7</i>
<i>Hearing &amp; Vision</i>	<i>Page 9</i>
<i>Lead &amp; Anemia</i>	<i>Page 10</i>
<i>Asthma</i>	<i>Page 11</i>
<i>Diabetes</i>	<i>Page 13</i>
<i>Women's Health &amp; Perinatal Care</i>	<i>Page 13</i>
<i>Ambulatory &amp; Acute Care</i>	<i>Page 15</i>
<i>Behavioral Health Screening &amp; Follow Up</i>	<i>Page 15</i>
<i>Consumer Survey</i>	<i>Page 16</i>
<b>CHIPRA Measure Numbers &amp; Acronyms</b>	<b>Page 17</b>
<b>List of Merged or Retired Measures</b>	<b>Page 17</b>
<b>Changes from Previous Document Version</b>	<b>Page 18</b>

## Maine IHOC Master List of Pediatric Measures with Numerators/Denominators

\* Updated October 2013 \*

**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. 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, then of the Muskie School of Public Service, University of Southern Maine; and Kyra Chamberlain, BS, RN, Project Manager of CHIPRA/IHOC in Maine. 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.

Links to Source Documents for the IHOC Master List of Pediatric Measures	
<p><b>CHIPRA Initial Core Set of Children’s Health Care Quality Measures</b>  <a href="http://www.medicaid.gov/Medicaid-CHIP-Program-Information/By-Topics/Quality-of-Care/CHIPRA-Initial-Core-Set-of-Childrens-Health-Care-Quality-Measures.html">http://www.medicaid.gov/Medicaid-CHIP-Program-Information/By-Topics/Quality-of-Care/CHIPRA-Initial-Core-Set-of-Childrens-Health-Care-Quality-Measures.html</a></p> <p><b>National Committee on Quality Assurance (NCQA) HEDIS Measures</b>  <a href="http://www.ncqa.org/HEDISQualityMeasurement/HEDISMeasures.aspx">http://www.ncqa.org/HEDISQualityMeasurement/HEDISMeasures.aspx</a></p> <p><b>NCQA’s National Quality Forum-endorsed Measures (NQF)</b>  <a href="http://www.qualityforum.org/QPS/">http://www.qualityforum.org/QPS/</a></p> <p><b>Agency for Healthcare Research and Quality’s U. S. Health Information Knowledgebase (USHIK) for Meaningful Use Measures</b>  <a href="http://ushik.ahrq.gov/MeaningfulUseMeasures?system=mu">http://ushik.ahrq.gov/MeaningfulUseMeasures?system=mu</a></p> <p><b>Bridges to Excellence (BTE) Asthma Clinician Guide and Measures</b>  <a href="http://www.hci3.org/sites/default/files/files/BTE%20Asthma%20Clinician%20Guide%2002.02.2012.pdf">http://www.hci3.org/sites/default/files/files/BTE%20Asthma%20Clinician%20Guide%2002.02.2012.pdf</a></p>	<p><b>Early and Periodic Screening, Diagnosis and Treatment (EPSDT) Overview</b>  <a href="https://www.cms.gov/medicaidearlyperiodicscrn/01_Overview.asp">https://www.cms.gov/medicaidearlyperiodicscrn/01_Overview.asp</a></p> <p><b>American Academy of Pediatrics’ Bright Futures Periodicity Schedule</b>  <a href="http://brightfutures.aap.org/pdfs/AAP%20Bright%20Futures%20Periodicity%20Schedule%20101107.pdf">http://brightfutures.aap.org/pdfs/AAP%20Bright%20Futures%20Periodicity%20Schedule%20101107.pdf</a></p> <p><b>Advisory Committee on Immunization Practices (ACIP) Recommendations</b>  <a href="http://www.cdc.gov/vaccines/schedules/hcp/child-adolescent.html">http://www.cdc.gov/vaccines/schedules/hcp/child-adolescent.html</a></p> <p><b>U.S. Preventive Services Task Force (USPSTF) Recommendations</b>  <a href="http://www.uspreventiveservicestaskforce.org/uspstf11/vischildren/vischildrs.htm">www.uspreventiveservicestaskforce.org/uspstf11/vischildren/vischildrs.htm</a></p> <p><b>Maine Childhood Lead Poisoning Prevention Program (MCLPPP)</b>  <a href="http://www.maine.gov/dhhs/eohp/lead/providers.shtml">http://www.maine.gov/dhhs/eohp/lead/providers.shtml</a></p> <p><b>Maine Lead Poisoning Control Act</b>  <a href="http://www.mainelegislature.org/legis/statutes/22/title22ch252.pdf">http://www.mainelegislature.org/legis/statutes/22/title22ch252.pdf</a></p>

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

<sup>1</sup> 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.

<sup>2</sup> 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 with continuous enrollment per CHIPRA specifications.

Measure	Operational Definition Numerator/Denominator	IHOC #	Measure Steward & Alignment <sup>1</sup>
<b>Children and Adolescent Access to Primary Care Practitioners (PCP)</b>  PROCESS MEASURE	<b>Numerator:</b> Number of children who had at least a visit with a PCP. Calculate rates for each denominator age range: a) 12-24 months years of age b) 25 months-6 years of age c) 7-11 years of age d) 12-19 years of age  <b>Denominator<sup>3</sup>:</b> Number of children who fall into the following age groups as of December 31 of measurement year: a) 12-24 months of age b) 25 months-6 years of age c) 7-11 years of age d) 12-19 years of age	45	NCQA/HEDIS (CAP)  CHIPRA (CAP)
<b>IMMUNIZATIONS<sup>4</sup></b>			
<b>Immunizations</b>  Childhood Immunization Status (CIS)  PROCESS MEASURE	<b>Numerator<sup>5</sup>:</b> 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 <sup>6</sup> (Haemophilus influenzae type B) 3 Hep B (hepatitis B) 1 VZV (varicella) 4 PCV (pneumococcal conjugate vaccine) 1 Hep A <sup>7</sup> (hepatitis A) 2 or 3 RV <sup>8</sup> (rotavirus) 2 Influenza (seasonal flu)  <b>Denominator:</b> The number of children who turn 2 years of age during the measurement year.	1	NCQA/HEDIS (CIS)  CHIPRA (CIS) Meaningful Use NQF #0038 EPSDT/BF CMMI

<sup>3</sup> 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).

<sup>4</sup> CHIPRA immunization measures are based on claims data specifications. Practices in Maine who enter dose-level data into ImmPact can produce ImmPact reports for these measures. CHIPRA defines "active patient" as one who was enrolled in MaineCare (Medicaid or CHIP) for 12 months prior to the child's corresponding birthday with no more than a one month gap in enrollment. For IHOC reports in ImmPact, "active patient" is defined as all patients assigned to the practice and who have not been flagged as MOGE (Moved or Gone Elsewhere). Numerator definitions in ImmPact reports follow ACIP guidelines which only count "valid" doses of vaccine ("valid" vaccine doses must be administered between minimum/maximum recommended ages; multiple-dose vaccines must be administered with recommended intervals between doses). CHIPRA numerator specifications do not include all of these ACIP dose validation requirements (e.g., maximum age of 8 months for final dose of RV and dose intervals for IPV and Hep B). Therefore, claims-based CHIPRA reports may differ from ImmPact reports. **Statewide Rates:** In 2012, IHOC began testing a method to calculate statewide rates using Registry data (ImmPact) linked with Eligibility and Claims Data (MIHMS); results to be determined. **Practice-level Rates:** State Registry (ImmPact).

<sup>5</sup> This measure calculates a rate for each vaccine and nine combination rates.

<sup>6</sup> 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.

<sup>7</sup> 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.

<sup>8</sup> "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.

Measure	Operational Definition Numerator/Denominator	IHOC #	Measure Steward & Alignment <sup>1</sup>
<b>Immunizations</b>  Immunizations by 6 Years of Age  PROCESS MEASURE	<b>Numerator<sup>9</sup>:</b> 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) <sup>10</sup>  <b>Denominator:</b> Number of children who turn 6 years of age during the measurement year.	2	Based on ACIP guidelines  EPSDT/BF
<b>Immunizations</b>  Immunization Status for Adolescents (IMA)  PROCESS MEASURE	<b>Numerator<sup>11</sup>:</b> Number of adolescents in the denominator who received the following vaccine doses: 1 MCV (meningococcal conjugate vaccine) on or between their 11 <sup>th</sup> and 13 <sup>th</sup> birthdays 1 Tdap (tetanus-diphtheria-acellular pertussis booster) OR 1 Td (tetanus-diphtheria booster) on or between their 10 <sup>th</sup> and 13 <sup>th</sup> birthdays  <b>Denominator:</b> Number of adolescents who turn 13 years of age during the measurement year	3	NCQA/HEDIS (IMA)  CHIPRA (IMA) NQF #1407 EPSDT/BF
<b>Immunizations</b>  Human Papillomavirus (HPV) Vaccine for Female and Male Adolescents  PROCESS MEASURE	<b>Numerator:</b> 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) <sup>12</sup>  <b>Denominator:</b> Number of female or male adolescents who turn 13 years of age during the measurement year. CHIPRA: Compute rate for females only. IHOC: Compute separate rates for females and males.	4	NCQA/HEDIS (HPV) females only  CHIPRA (HPV) females only NQF #1959 EPSDT/BF
<b>Immunizations</b>  Childhood Immunization Status  PROCESS MEASURE	<b>Numerator:</b> Number of children in the denominator who received an influenza immunization OR who reported previous receipt of an influenza immunization.  <b>Denominator:</b> Number of children aged 6 months and older who are seen for a visit between Oct 1 and Mar 31.	55	AMA-PCPI  Meaningful Use NQF #0041 Federal ACO #14

<sup>9</sup> This measure calculates a rate for each vaccine and a combination rate.

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

<sup>11</sup> The measure calculates a rate for each vaccine and a combination rate.

<sup>12</sup> 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	IHOC #	Measure Steward & Alignment <sup>1</sup>
<b>GENERAL DEVELOPMENTAL and AUTISM SCREENING<sup>13</sup></b>			
<b>Developmental Screening</b>  Developmental Screening in the First Three Years of Life (DEV)          PROCESS MEASURE	<b>Numerator:</b> Number of children in the denominator who were screened for risk of developmental, behavioral, and social delays using a standardized tool <sup>14</sup> : 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  <b>Denominator<sup>15</sup>:</b> 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	<b>8</b>	Oregon Health and Science University NCQA  CHIPRA (DEV) NQF #1448 EPSDT/BF
<b>Developmental Screening</b>  Autism Screening in the First Three Years of Life          PROCESS MEASURE	<b>Numerator:</b> Number of children in the denominator who were screened with a standardized autism screening tool <sup>16</sup> : a) On or by their 2nd birthday b) After their 2nd birthday and on or by their 3rd birthday  <b>Denominator<sup>17</sup>:</b> Number of children who turned: a) 2 years of age b) 3 years of age	<b>9</b>	EPSDT/BF  Autism-specific tools not included in CHIPRA DEV

<sup>13</sup> MaineCare-specific (Statewide and Practice-level) rates for this group of measures is being tested using claims data (MIHMS). Practice-level rates for First STEPS Phase II were generated via chart review.

<sup>14</sup> 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.

<sup>15</sup> 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.

<sup>16</sup> MaineCare uses CPT codes 96110 HI for MCHAT I and 96111 HK for MCHAT II. Target is screening at 18-24 months WCV, but tools are validated for children 16 to 30 months.

<sup>17</sup> 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	IHOC #	Measure Steward & Alignment <sup>1</sup>
<b>HEALTHY WEIGHT<sup>18</sup></b>			
<b>Healthy Weight</b>  Body Mass Index Assessment for Children/Adolescents       PROCESS MEASURE  OUTCOME MEASURE (w/BMI stratification)	<b>Numerator:</b> 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) IHOC: Also report BMI classification <sup>19</sup> : Number of children in the denominator with BMI of < 5%; 5-84%; 85-94%; 95-98% and > 99%. Calculate rates by age as above.  <b>Denominator:</b> 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	Based on NCQA/HEDIS (WCC) but includes BMI documentation only; does not include counseling  CHIPRA (WCC) EPSDT/BF <sup>20</sup> CMMI
<b>Healthy Weight</b>  Weight assessment and counseling on nutrition and physical activity for children and adolescents       PROCESS MEASURE	<b>Numerator:</b> 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> 5-2-1-0). 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)  <b>Denominator:</b> 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)	6	NCQA/HEDIS (WCC)  Meaningful Use NQF #0024 EPSDT/BF <sup>21</sup>

<sup>18</sup> IHOC #5 and #6: Practice-level rates for First STEPS Phase III generated via chart review and EHR/health system registry data. MaineCare-specific, Statewide rates for IHOC#6 being tested via claims data (MIHMS).

<sup>19</sup> Reporting of BMI percentile results are not part of the CHIPRA measure. BMI classification was added to this measure at the request of IHOC stakeholders and is based on National Health and Nutrition Examination Survey (NHANES) classification. For more information, see <http://www.cdc.gov/nchs/nhanes.htm>.

<sup>20</sup> Measure only captures screening beginning at age 3. Note that Bright Futures/AAP recommends screening for BMI beginning at 24 months.

<sup>21</sup> 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	IHOC #	Measure Steward & Alignment <sup>1</sup>
<b>ORAL HEALTH<sup>22</sup></b>			
<b>Oral Health<sup>23</sup></b>  Oral health risk assessment  PROCESS MEASURE	<b>Numerator:</b> Number of children in the denominator who have had an oral health risk assessment. <sup>24</sup> 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  <b>Denominator:</b> 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	<b>14</b>	From the First Tooth  EPSDT/BF
<b>Oral Health<sup>25</sup></b>  Oral health risk assessment  PROCESS MEASURE	<b>Numerator:</b> Number of children in the denominator who have had an oral health risk assessment <sup>26</sup> 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  <b>Denominator:</b> 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 e) 6 months to <36 months old	<b>58</b>	From the First Tooth  EPSDT/BF

<sup>22</sup> IHOC#14, 15, and 16: Practice-level data for First STEPS Phase III generated via chart review and EHR/health system registry. No current data source for Statewide rates. IHOC #16, 38, and 39: MaineCare-specific, Statewide rates generated via claims data (MIHMS). IHOC #38 and 39: No current data source for Practice-level rates.

<sup>23</sup> 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.

<sup>24</sup> 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<sup>st</sup>, 2013, medical providers are now able to bill for this service using the code D0145 (Oral Evaluation for Children under 3 Years of Age).

<sup>25</sup> 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.

<sup>26</sup> 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, 2013, 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	IHOC #	Measure Steward & Alignment <sup>1</sup>
<p><b>Oral Health</b></p> <p>Documentation of a dental home</p> <p>OUTCOME MEASURE</p>	<p><b>Numerator:</b> Number of children in the denominator with documentation of dental home<sup>27</sup> 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:</p> <ul style="list-style-type: none"> <li>a) 6 months to &lt;12 months</li> <li>b) 12 months to &lt;24 months</li> <li>c) 24 months to &lt;36 months</li> <li>d) 36 months to &lt;48 months (&lt;4 years old)</li> <li>e) 6 months to &lt;48 months (&lt;4 years old)</li> </ul> <p><b>Denominator:</b> Number of children who had a WCV/other primary care visit during the measurement year and who were:</p> <ul style="list-style-type: none"> <li>a) 6 months to &lt;12 months old</li> <li>b) 12 months to &lt;24 months old</li> <li>c) 24 months to &lt;36 months old</li> <li>d) 36 months to &lt;48 months (&lt;4 years old)</li> <li>e) 6 months to &lt;48 months (&lt;4 years old)</li> </ul>	15	From the First Tooth  EPSDT/BF
<p><b>Oral Health<sup>28</sup></b></p> <p>Children with fluoride varnish</p> <p>PROCESS MEASURE</p>	<p><b>Numerator:</b> Number of children in the denominator with fluoride varnish provided by a non-dental provider.<sup>29</sup> Calculate separate rates for each denominator age range:</p> <ul style="list-style-type: none"> <li>a) 6 months to &lt;12 months</li> <li>b) 12 months to &lt;24 months</li> <li>c) 24 months to &lt;36 months</li> <li>d) 36 months to &lt;48 months (&lt;4 years old)</li> <li>e) 6 months to &lt;48 months (&lt;4 years old)</li> </ul> <p><b>Denominator<sup>30</sup>:</b> Number of children seen for a WCV/other primary care visit during the measurement year and who were:</p> <ul style="list-style-type: none"> <li>a) 6 months to &lt;12 months old</li> <li>b) 12 months to &lt;24 months old</li> <li>c) 24 months to &lt;36 months old</li> <li>d) 36 months to &lt;48 months (&lt;4 years old)</li> <li>e) 6 months to &lt;48 months (&lt;4 years old)</li> </ul>	16	From the First Tooth  EPSDT/BF

<sup>27</sup> 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?”

<sup>28</sup> 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.

<sup>29</sup> 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.

<sup>30</sup> 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	IHOC #	Measure Steward & Alignment <sup>1</sup>
<b>Oral Health<sup>31</sup></b>  Percentage of Eligibles That Received Preventive Dental Services  PROCESS MEASURE	<b>Numerator:</b> Number of children in the denominator receiving preventive dental services defined by HCPC codes D1000 - D1999 (ADA codes D1000 - D1999)  <b>Denominator:</b> 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) d) 1 year to <21 years (CHIPRA)	<b>38</b>	Centers for Medicare & Medicaid Services  CHIPRA (PDENT) EPSDT/BF
<b>Oral Health<sup>32</sup></b>  Percentage of Eligibles That Received Dental Treatment Services  PROCESS MEASURE	<b>Numerator:</b> Number of children in the denominator receiving dental treatment services defined by HCPC codes D2000-D9999 (ADA/CDT codes 02000-09999)  <b>Denominator:</b> Number of children shown on line 12c 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) d) 1 year to <21 years (CHIPRA)	<b>39</b>	Centers for Medicare & Medicaid Services  CHIPRA (TDENT) EPSDT/BF
<b>HEARING and VISION<sup>33</sup></b>			
<b>Hearing</b>  Newborn hearing screen and audiologic evaluation <sup>34</sup>  PROCESS MEASURE	<b>Numerator:</b> 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.  <b>Denominator:</b> 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.	<b>52</b>	USPSTF
<b>Hearing</b>  Hearing test prior to age 6 PROCESS MEASURE	<b>Numerator:</b> Number of children in denominator who had at least one hearing test recorded in the chart.  <b>Denominator:</b> 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.	<b>11</b>	Based on 2010 CMS Priority Area  EPSDT/BF

<sup>31</sup> 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.

<sup>32</sup> 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.

<sup>33</sup> Data sources for Statewide and Practice-level rates for this group of measures are not yet identified.

<sup>34</sup> 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.

Measure	Operational Definition Numerator/Denominator	IHOC #	Measure Steward & Alignment <sup>1</sup>
<b>Vision</b>  Vision test, ages 3– 6 years   PROCESS MEASURE	<b>Numerator:</b> 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  <b>Denominator:</b> 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	<b>12</b>	Based on 2010 CMS Priority Area
<b>Vision</b>  Vision test, by age 6 years   PROCESS MEASURE	<b>Numerator:</b> Number of children in the denominator who had a documented visual acuity test.  <b>Denominator:</b> 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.	<b>13</b>	Based on USPSTF recommendations and 2010 CMS Priority Areas  EPSDT/BF
<b>LEAD<sup>35</sup> and ANEMIA<sup>36</sup></b>			
<b>Lead</b>  Lead risk assessment questionnaire <sup>37</sup> completed for children 3 years of age and under.   PROCESS MEASURE	<b>Numerator:</b> Number of children in denominator who had at least ONE lead risk assessment questionnaire completed: a) Between their 1st and 2nd birthdays. b) After their 2nd birthday and on or by their 3rd birthday. Number of children in the denominator who had at least TWO lead risk assessment questionnaires completed: c) On or by their 3rd birthday.  <b>Denominator:</b> Number of children who had a WCV/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	<b>17</b>	Maine Lead Poisoning Control Act (Title 2, Ch. 252)  EPSDT/BF Maine Childhood Lead Poisoning Prevention Program (MCLPPP)

<sup>35</sup> For statewide MaineCare rates, only include MaineCare-enrolled children.

<sup>36</sup> 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.

<sup>37</sup> 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.

Measure	Operational Definition Numerator/Denominator	IHOC #	Measure Steward & Alignment <sup>1</sup>
<b>Lead</b>  Blood lead test completed for children 3 years of age and under.  PROCESS MEASURE	<b>Numerator:</b> Number of children in the denominator who had at least ONE lead test completed: a) Between their 1st and 2nd birthdays. b) After their 2nd birthday and on or by their 3rd birthday. c) Number of children in the denominator who had at least TWO lead tests completed on or by their 3rd birthday.  <b>Denominator:</b> Number of children who had a WCV/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	<b>18</b>	Modified CMS 416 Maine Lead Poisoning Control Act (Title 2, Ch. 252) EPSDT/BF Maine Childhood Lead Poisoning Prevention Program (MCLPPP)
<b>Anemia</b>  Anemia tests completed between the ages of 1 and 2 years and 2 and 3 years.  PROCESS MEASURE	<b>Numerator:</b> 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.  <b>Denominator:</b> Number of children enrolled in MaineCare during the measurement year and who turned: a) 2 years of age b) 3 years of age	<b>22</b>	Based on WIC recommendations  EPSDT/BF
<b>ASTHMA (Priority Measures for Maine Health Management Coalition's Pathways to Excellence Program)<sup>38</sup></b>			
<b>Asthma</b>  Assessment and classification  PROCESS MEASURE	<b>Numerator:</b> 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. <sup>39</sup>  <b>Denominator:</b> 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.	<b>23</b>	AMA-PCPI CMMI BTE (adapted for children) Formerly endorsed by NQF (#0001)
<b>Asthma</b>  Lung function testing  PROCESS MEASURE	<b>Numerator:</b> Number of children in the denominator who have had spirometry completed at least once in the last 24 months.  <b>Denominator:</b> 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.	<b>24</b>	BTE (adapted for children) NHLBI Guidelines <sup>40</sup>

<sup>38</sup> 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).

<sup>39</sup> 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)

<sup>40</sup> 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	IHOC #	Measure Steward & Alignment <sup>1</sup>
<b>Asthma</b>  Medication Management for People with Asthma   PROCESS MEASURE	<b>Numerator:</b> a) CHIPRA: 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. b) Meaningful Use: Number of patients in the denominator who were appropriately prescribed controller medication during the measurement year. c) PTE: Number of children in the denominator who were appropriately prescribed controller medication within the last 12 months.  <b>Denominator:</b> a) CHIPRA: 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. b). 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. c) PTE: 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.	25	CHIPRA (MMA) based on NCQA/HEDIS (ASM/NQF #1799) which includes ages 5-64 yrs  Meaningful Use NQF #0036 (ages 5-64 yrs)  BTE (adapted for children)
<b>Asthma</b>  Influenza Vaccination  PROCESS MEASURE	<b>Numerator:</b> Number of children in the denominator who had a flu shot within the last 12 months.  <b>Denominator:</b> 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 (adapted for children)  NHLBI Guidelines
<b>Asthma</b>  Patient Self-Management Plan  PROCESS MEASURE	<b>Numerator:</b> Number of children in the denominator with a written asthma action plan updated within the past 12 months.  <b>Denominator:</b> 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 (adapted for children)  NHLBI Guidelines
<b>Asthma</b>  Tobacco Exposure <sup>41</sup> and Use  PROCESS MEASURE	<b>Numerator:</b> 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.  <b>Denominator:</b> 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 <sup>42</sup> (adapted for children)

<sup>41</sup> Tobacco exposure is defined as someone who uses tobacco who lives in the household or is a primary caregiver.

<sup>42</sup> This measure was adapted from the BTE measure for adults which 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	IHOC #	Measure Steward & Alignment <sup>1</sup>
<b>Asthma</b>  Patient Body Mass Index  PROCESS MEASURE	<b>Numerator:</b> Number of children in denominator who have evidence of Body Mass Index (BMI) percentile documentation within the last 12 months.  <b>Denominator:</b> 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.	<b>29</b>	BTE (adapted for children)
<b>Asthma</b>  Annual Percentage of Asthma Patients with One or More Asthma-Related Emergency Room (ER) Visits  OUTCOME MEASURE	<b>Numerator:</b> 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.  <b>Denominator:</b> Number of children age 2 - <21 years diagnosed with asthma during the measurement year.	<b>42</b>	Alabama Medicaid  CHIPRA (ASMER) NQF #1381  <i>Not</i> included in Maine Health Management Coalition's Pathways to Excellence Program
<b>DIABETES<sup>43</sup></b>			
<b>Diabetes</b>  Annual Pediatric Hemoglobin (HbA1c) Testing  PROCESS MEASURE	<b>Numerator:</b> 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.  <b>Denominator:</b> A systematic sample of patients, ages 5-17 years with a diagnosis of diabetes and/or notation of prescribed insulin/oral hypoglycemics/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.	<b>43</b>	NCQA  CHIPRA (PA1C) Meaningful Use NQF #0060
<b>WOMEN'S HEALTH and PERINATAL CARE<sup>44</sup></b>			
<b>Chlamydia Screening for Women</b>  PROCESS MEASURE	<b>Numerator:</b> The number of women in the denominator who had at least one chlamydia test during the measurement year.  <b>Denominator:</b> Number of women 16-20 years of age as of Dec 31st of the measurement year who were identified as sexually active.	<b>37</b>	NCQA/HEDIS (CHL)  CHIPRA (CHL) Meaningful Use (ages 16 - 24 years) NQF #0033 (ages 16 - 24 years)

<sup>43</sup> MaineCare-specific, Statewide and Practice-level rates are generated via claims data (MIHMS).

<sup>44</sup> 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.

Measure	Operational Definition Numerator/Denominator	IHOC #	Measure Steward & Alignment <sup>1</sup>
<b>Behavioral Health Risk Assessment for Pregnant Women</b>  PROCESS MEASURE	<b>Numerator:</b> 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.  <b>Denominator:</b> Number of patients (regardless of age) who gave birth during a 12 month period and were seen at least once for prenatal care.	<b>53</b>	AMA-PCPI  CHIPRA (BHRA)  <i>NEW 2013 CHIPRA MEASURE<sup>45</sup></i>
<b>Prenatal Care</b>  Frequency of Ongoing Prenatal Care  OUTCOME MEASURE	<b>Numerator:</b> 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.  <b>Denominator:</b> 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.	<b>46</b>	NCQA/HEDIS (FPC)  CHIPRA (FPC) NQF #1391 CMMI
<b>Prenatal Care</b>  Timeliness of Prenatal Care  OUTCOME MEASURE	<b>Numerator:</b> Number of women in the denominator sample who had a prenatal visit in the first trimester or within 42 days of enrollment.  <b>Denominator<sup>46</sup>:</b> Number of women <sup>47</sup> who delivered a live birth between Nov 6 of the year prior to measurement year & Nov 5 of the measurement year.	<b>47</b>	NCQA/HEDIS (PPC)  CHIPRA (PPC) NQF #1517 (includes post-partum care)
<b>Live Births Weighing Less than 2,500 Grams</b>  OUTCOME MEASURE	<b>Numerator:</b> Number of resident live births less than 2,500 grams during the reporting period with Medicaid/CHIP as the payer source.  <b>Denominator:</b> Number of resident live births <sup>48</sup> during the reporting period with Medicaid/CHIP as the payer source.	<b>48</b>	CDC (National Center for Health Statistics)  CHIPRA (LBW)
<b>Cesarean Rate for Nulliparous Singleton Vertex</b>  OUTCOME MEASURE	<b>Numerator:</b> Number of women in the denominator who had a cesarean birth.  <b>Denominator:</b> 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).	<b>49</b>	CMQC  CHIPRA (CSEC) NQF #0471

<sup>45</sup> 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.

<sup>46</sup> For MaineCare rates, apply CHIPRA continuous enrollment specifications: 43 days prior to delivery through 56 days after delivery.

<sup>47</sup> No age specifications for the mother but data can be reported separately for adolescents.

<sup>48</sup> No age specifications for the mother but data can be reported separately for adolescents.

Measure	Operational Definition Numerator/Denominator	IHOC #	Measure Steward & Alignment <sup>1</sup>
<b>AMBULATORY and ACUTE CARE<sup>49</sup></b>			
<b>Ambulatory Care</b>  Emergency Department (ED) Visits  OUTCOME MEASURE	<b>Numerator:</b> Number of ED visits for children in the denominator.  <b>Denominator:</b> 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.	<b>41</b>	NCQA/HEDIS (AMB)  CHIPRA (AMB) NQF #0173 (includes adults)
<b>Pediatric Central Line-Associated Blood Stream Infections</b>  OUTCOME MEASURE	<b>Numerator:</b> Number of catheter-associated blood stream infections identified during the month selected for surveillance.  <b>Denominator:</b> Number of central line days during the month selected for surveillance.	<b>50</b>	CDC  CHIPRA (CLABSI) NQF #0139 (includes adults)
<b>Pharyngitis</b>  Appropriate Testing for Children with Pharyngitis  PROCESS MEASURE	<b>Numerator:</b> Number of children in denominator who had a strep test administered in the 7 day period from 3 days prior though 3 days after the first presentation of illness.  <b>Denominator:</b> Number of children age 2 - 18 years who had an outpatient visit with a diagnosis of pharyngitis and were dispensed an antibiotic. Continuous enrollment – 30 days prior to the episode date through 3 days after the episode date (inclusive).	<b>30</b>	NCQA/HEDIS (CWP)  CHIPRA (CWP) Meaningful Use NQF #0002 BTE
<b>BEHAVIORAL HEALTH SCREENING and FOLLOW UP<sup>50</sup></b>			
<b>Screening for Clinical Depression</b>  PROCESS MEASURE	<b>Numerator:</b> Number of those in the denominator who were screened for clinical depression using a standardized tool, with follow up plan documented.  <b>Denominator:</b> Number of patients 12 years of age and older	<b>54</b>	Centers for Medicare and Medicaid Services  Meaningful Use NQF #0418 Federal ACO #18

<sup>49</sup> 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).

<sup>50</sup> 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	IHOC #	Measure Steward & Alignment <sup>1</sup>
<b>ADHD Follow-up Care</b>  Follow-up Care for Children Prescribed Attention-Deficit/Hyperactivity Disorder (ADHD) Medication  PROCESS MEASURE	<b>Numerator:</b> <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.  <b>Denominator:</b> 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.	36	NCQA/HEDIS (ADD)  CHIPRA (ADD) Meaningful Use NQF #0108
<b>Follow-Up After Hospitalization for Mental Illness</b>  PROCESS MEASURE	<b>Numerator:</b> Number of children in the denominator with an outpatient visit, intensive outpatient encounter, or partial hospitalization with a mental health practitioner within: a) 7 days after discharge b) 30 days after discharge  <b>Denominator:</b> 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.	44	NCQA/HEDIS (FUH)  CHIPRA (FUH) NQF #0576 (includes adults) CMMI
<b>CONSUMER SURVEY<sup>51</sup></b>			
<b>Consumer Assessment of Healthcare Providers and Systems (CAHPS) Health Plan Survey 5.0h</b>  COMPOSITE MEASURE	<b>Numerator:</b> Survey items  <b>Denominator:</b> 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 <sup>52</sup>	51	NCQA/HEDIS (CPC)  CHIPRA (CPC) NQF #0517 (excludes children) CMMI

<sup>51</sup> This measure is a survey.

<sup>52</sup> 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.

### 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 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.

<b>Current Version: IHOC_List_of_Pediatric_Measures_October_2013</b>	
<b>Previous Version: IHOCList_of_Pediatric_Measures_05102013</b>	
<b>Change/Revision</b>	<b>Applicable IHOC Measure #</b>
Added Title Page and Table of Contents	n/a
Revised and updated narrative introduction (Overview)	n/a
Updated list of reference links to websites and organizations	n/a
Revised sub-headings and grouped measures according to topic area	all
Removed “Measure Type” Column and added information to “Measure” column under title and description	all
Updated foot notes; added/removed footnotes as needed	all
Added Data Source footnotes (Statewide and Practice-Level)	all
Reviewed and updated “Measure Steward and Alignment” column	all
Replaced former CHIPRA measure numbers with new CHIPRA acronyms and added table to document	all CHIPRA measures
Revised “Measure” column language to match measure steward’s language for measure titles and descriptions	all
Clarified language for ages ranges and made consistent across measures, when possible	all
Changed IHOC #1 to 1 dose of Hep A from 2 doses of Hep A, based on HEDIS/CHIPRA updated specifications	1
Changed IHOC #4 to age range to 9-13 years old to align with HEDIS/CHIPRA specifications	4
Changed IHOC #9 age range to 2 and 3 year olds, to align with IHOC #8	9
Merged developmental screening measures: IHOC #7 and IHOC #10 are now included in IHOC #8	7, 10, 8

<b>Current Version: IHOC_List_of_Pediatric_Measures_October_2013</b>	
<b>Previous Version: IHOCList_of_Pediatric_Measures_05102013</b>	
<b>Change/Revision</b>	<b>Applicable IHOC Measure #</b>
Added new rate to IHOC #16 Fluoride Varnish: <i>At least 4 fluoride varnishes by 4 years of age</i>	16
Merged lead questionnaire measures: IHOC #19 is now included in IHOC#17	17, 19
Merged lead test measures: IHOC #20 and IHOC #21 are now included in IHOC #18	18, 20, 21
Incorporated new CHIPRA measures into existing, corresponding IHOC Measures	4, 25
Added new measure: <i>CHIPRA BHRA (Maternal Behavioral Health Risk Assessment)</i>	53
Added new measure: <i>Federal ACO #14 (Childhood Immunization Status—Influenza)</i>	55
Added new measure: <i>Federal ACO #18 (Screening for Clinical Depression, 12 years and older)</i>	54
Retired IHOC #40 (CHIPRA #16) per CMS	40
Placeholder for Oral Health Measure (IHOC#56) for fluoride varnish application (similar to Meaningful Use Stage 2 measure). Currently in development and review; expected to be added to list in 2014.	56
Placeholder for Oral Health Measure (IHOC#57) for oral health assessment and/or fluoride varnish application. Currently in development and review; expected to be added to list in 2014.	57