

Quality of Care for Children and Adults in Medicaid and CHIP: Overview of Findings from the 2018 Child and Adult Core Sets

Introduction

At the Centers for Medicare & Medicaid Services (CMS), we are focused on transforming the health care system into one that delivers better value to patients through competition and innovation. To achieve this, we have three main objectives: empowering patients, focusing on results, and unleashing innovation. Together, Medicaid and the Children's Health Insurance Program (CHIP) cover 72 million children and adults.¹ The Child and Adult Core Sets promote our objective of focusing on results by supporting federal and state efforts to collect, report, and use a standardized set of measures to drive improvement in the quality of care provided to Medicaid and CHIP beneficiaries. CMS's goals for state reporting of the Core Sets include: maintaining or increasing the number of states reporting Core Set measures; maintaining or increasing the number of measures reported by each state; and improving the quality and completeness of the data reported. Core Set reporting is also important because the State Health System Performance pillar of the Medicaid and CHIP (MAC) Scorecard uses Core Set data for several measures. CMS annually reports information on state performance on the Child and Adult Core Set measures. This fact sheet summarizes state progress in reporting the Child and Adult Core Set measures for federal fiscal year (FFY) 2018, including an overview of performance for measures reported by at least 25 states and which met CMS standards for data quality.

FFY 2018 Child Core Set Reporting

The number of states reporting Child Core Set measures has increased substantially since the release of the Child Core Set in 2010.² All states voluntarily reported at least

one Child Core Set measure for FFY 2018, with 43 states reporting at least half (13) of the measures.³ The median number of measures reported by states was 18, which is consistent with the median number of measures reported for FFY 2016 and FFY 2017. In addition, 21 states reported more Child Core Set measures for FFY 2018 than for FFY 2017.

CMS has also worked with states to increase the number reporting performance for both Medicaid and CHIP populations. However, for FFY 2018, 46 states included both Medicaid and CHIP beneficiaries for at least one measure, as compared to 47 states for FFY 2017.

CMS annually releases Child Core Set data for measures that were reported by at least 25 states and met CMS standards for data quality. For FFY 2018, 23 of the 26 Child Core Set measures met CMS's threshold for public reporting of state-specific results. CMS is publicly reporting four Child Core Set measures for the first time for FFY 2018:

- Asthma Medication Ratio: Ages 5-18
- Contraceptive Care: Postpartum Women Ages 15-20
- Contraceptive Care: All Women Ages 15-20
- Use of First-Line Psychosocial Care for Children and Adolescents on Antipsychotics: Ages 1-17.

The most frequently reported Child Core Set measures for FFY 2018 focused on primary care access and preventive care (receipt of well-care visits and access to primary care practitioners), emergency department use, preventive dental service use, and follow-up care after hospitalizations for mental illness. The most frequently reported measures were consistent between FFY 2017 and FFY 2018.

¹ June 2019 Medicaid and CHIP Enrollment Data Highlights are available at <https://www.medicaid.gov/medicaid/program-information/medicaid-and-chip-enrollment-data/report-highlights/index.html>.

² CMS is required to update the Core Sets annually, which results in changes to the measures included in the Core Sets. These updates may affect the number of measures publicly reported each year.

³ The term "states" includes the 50 states and the District of Columbia.

CMS analyzed state performance on the 23 publicly reported Child Core Set measures for FFY 2018. Median state performance was above 75 percent on measures of access to primary care practitioners, receipt of recommended vaccinations among adolescents (Combination 1), and timeliness of prenatal care.

Median performance was below 50 percent for two measures of dental and oral health care (preventive dental service use and dental sealants), two measures of access to behavioral health care (follow-up after hospitalization for mental illness within 7 days of discharge and follow-up visits within 30 days of new attention-deficit/hyperactivity disorder [ADHD] medication prescription), and the developmental screening measure. Median performance was also below 50 percent on two indicators of adolescent health care (well-care visits and human papillomavirus [HPV] vaccination).

FFY 2018 Adult Core Set Reporting

For FFY 2018, 45 states voluntarily reported at least one measure for the Adult Core Set, consistent with 45 states reporting for FFY 2017. The median number of Adult Core Set measures reported by states was 20, which is an increase from 17 measures for FFY 2017. Thirty-two states reported at least half (16) of the measures for FFY 2018. In addition, 36 states reported more Adult Core Set measures for FFY 2018 than for FFY 2017.

As with the Child Core Set, CMS annually releases data for Adult Core Set measures that were reported by at least 25 states and met CMS standards for data quality. For FFY 2018, CMS is publicly reporting state performance on 23 of the 33 Adult Core Set measures, up from 16 measures for FFY 2016 and 19 measures for FFY 2017. CMS is publicly reporting four Adult Core Set measures for the first time for FFY 2018:⁴

- Asthma Medication Ratio: Ages 19-64
- Contraceptive Care: Postpartum Women Ages 21-44
- Follow-up After Emergency Department Visit for Mental Illness or Alcohol and Other Drug Abuse or Dependence: Age 18 and Older
- Plan All-Cause Readmissions: Ages 18-64.

The most frequently reported measures for FFY 2018 focus on access to primary care and preventive care

⁴ In addition, due to measure specification changes for the Initiation and Engagement of Alcohol and Other Drug (AOD) Abuse or Dependence measure for FFY 2018, performance data for this measure are being reported for the first time by diagnosis cohort,

(breast cancer screening, cervical cancer screening, and chlamydia screening in women ages 21 to 24), diabetes management, postpartum care visits, and follow-up after hospitalization for mental illness. The most frequently reported measures were consistent between FFY 2017 and FFY 2018.

CMS analyzed state performance on the 23 publicly reported Adult Core Set measures for FFY 2018. Median state performance was above 75 percent for two measures of care for acute and chronic conditions (monitoring of people on persistent medications and hemoglobin A1c testing for people with diabetes), a behavioral health care measure (diabetes screening for people with schizophrenia or bipolar disorder who are using antipsychotic medications), and the adult body mass index assessment measure.

Median state performance was below 50 percent for at least one component of care for four behavioral health care measures: antidepressant medication management, follow-up after hospitalization for mental illness, follow-up after emergency department visit for mental illness or alcohol and other drug abuse or dependence, and initiation and engagement of alcohol and other drug dependence treatment.

Continued public reporting of Child and Adult Core Set measures and the addition of public reporting for eight Adult Core Set measures for FFY 2018 is the result of CMS working with states to increase the number of states reporting and improve the quality of data reported for these measures over previous years of reporting.

For More Information

More information on the Child Core Set is available at <https://www.medicaid.gov/medicaid/quality-of-care/performance-measurement/adult-and-child-health-care-quality-measures/child-core-set/index.html>.

More information on the Adult Core Set is available at <https://www.medicaid.gov/medicaid/quality-of-care/performance-measurement/adult-and-child-health-care-quality-measures/adult-core-set/index.html>.

including alcohol abuse or dependence, opioid abuse or dependence, other drug abuse or dependence, and total AOD abuse or dependence.