

Table ADD-CH. Percentage of Children Ages 6 to 12 Prescribed Medication for ADHD who Received at Least One Visit During the 30-Day Initiation Phase and at Least Two Visits During the 9-Month Continuation and Maintenance Phase, as Submitted by States for the FFY 2018 Child Core Set Report (n = 40 states)

State	Population	Methodology	Denominator		Rate	
			Initiation Phase	Continuation & Maintenance Phase	Initiation Phase	Continuation & Maintenance Phase
State Mean					48.6	59.1
State Median					48.7	61.1
Alabama	Medicaid only	Administrative	7,332	535	52.7	96.6
Alabama	CHIP only	Administrative	905	201	42.0	56.7
Alaska	Medicaid & CHIP	Administrative	243	70	53.5	65.7
Arkansas	Medicaid & CHIP	Administrative	7,691	1,253	61.6	72.4
California	Medicaid & CHIP	Administrative	27,091	7,053	43.6	52.5
Connecticut	Medicaid & CHIP	Administrative	3,188	974	59.3	69.9
Delaware	Medicaid & CHIP	Administrative	966	248	44.5	63.7
Dist. of Col.	Medicaid & CHIP	Administrative	477	59	38.6	44.1
Florida	Medicaid & CHIP	Administrative	30,427	5,438	47.8	63.2
Georgia	Medicaid & CHIP	Administrative	21,846	4,208	46.1	61.8
Hawaii	Medicaid & CHIP	Administrative	510	102	51.6	53.9
Illinois	Medicaid & CHIP	Administrative	13,070	3,109	30.7	40.0
Indiana	Medicaid & CHIP	Administrative	8,260	2,444	50.2	57.2
Iowa	Medicaid only	Administrative	3,516	698	9.9	23.9
Iowa	CHIP only	Administrative	1,267	273	9.4	22.7
Kansas	Medicaid & CHIP	Administrative	3,691	1,173	49.5	57.5
Kentucky	Medicaid & CHIP	Administrative	7,530	2,741	57.2	63.6
Louisiana	Medicaid & CHIP	Administrative	18,822	3,479	56.7	70.2
Maine	Medicaid & CHIP	Administrative	1,665	701	66.7	73.6
Massachusetts	Medicaid & CHIP	Administrative	5,748	1,361	53.1	62.6
Michigan	Medicaid only	Administrative	10,128	3,019	43.9	53.6
Mississippi	Medicaid only	Administrative	7,209	1,335	59.2	69.4
Mississippi	CHIP only	Administrative	886	163	51.7	68.1
Nevada	Medicaid only	Administrative	824	144	44.5	55.6
Nevada	CHIP only	Administrative	90	22	51.1	#
New Hampshire	Medicaid & CHIP	Administrative	1,260	429	46.9	56.4
New Jersey	Medicaid & CHIP	Administrative	6,378	1,248	33.1	35.7
New Mexico	Medicaid & CHIP	Administrative	2,380	524	47.6	60.3
New York	Medicaid & CHIP	Administrative	15,823	3,740	58.5	66.4
North Carolina	Medicaid only	Administrative	18,125	4,512	42.4	54.8
North Carolina	CHIP only	Administrative	1,994	478	42.8	54.2
Ohio	Medicaid & CHIP	Administrative	15,322	4,473	55.9	65.5
Oklahoma	Medicaid & CHIP	Administrative	8,601	7,650	65.2	64.1
Oregon	Medicaid & CHIP	Administrative	1,963	666	64.0	75.4
Pennsylvania	Medicaid & CHIP	Administrative	13,996	4,011	41.9	49.4

Table ADD-CH (continued)

State	Population	Methodology	Denominator		Rate	
			Initiation Phase	Continuation & Maintenance Phase	Initiation Phase	Continuation & Maintenance Phase
Rhode Island	Medicaid & CHIP	Administrative	1,240	298	47.3	59.1
South Carolina	Medicaid & CHIP	Administrative	11,372	2,333	55.8	65.9
Tennessee	Medicaid only	Administrative	10,975	2,636	46.0	57.9
Tennessee	CHIP only	Administrative	754	200	42.8	56.0
Texas	Medicaid only	Administrative	46,632	7,533	37.6	50.4
Texas	CHIP only	Administrative	3,103	319	34.9	50.2
Utah	Medicaid only	Administrative	425	97	33.2	33.0
Utah	CHIP only	Administrative	139	34	36.7	26.5
Vermont	Medicaid & CHIP	Administrative	769	378	68.4	71.7
Virginia	Medicaid & CHIP	Administrative	NR	NR	49.5	61.8
Washington	Medicaid & CHIP	Administrative	5,208	1,518	42.4	49.1
West Virginia	Medicaid only	Administrative	2,898	1,289	37.0	37.2
West Virginia	CHIP only	Administrative	513	513	49.1	95.7
Wyoming	CHIP only	Administrative	77	31	50.6	80.6

Source: Mathematica analysis of MACPro reports for the FFY 2018 reporting cycle. 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>.

Notes: This measure identifies the percentage of children ages 6 to 12 newly prescribed attention-deficit/hyperactivity disorder (ADHD) medication who had at least three follow-up visits within a 10-month period, including one follow-up visit with a practitioner with prescribing authority during the 30-day initiation phase and, among those who remained on ADHD medication for at least 210 days, at least two additional follow-up visits with a practitioner during the continuation and maintenance phase.

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

Means are calculated as the unweighted average of all state rates. When a state reported separate rates for its Medicaid and CHIP populations, the mean and median rates were calculated using the rate for the larger measure-eligible population.

Unless otherwise specified, states used Child Core Set specifications, based on National Committee for Quality Assurance 2018 specifications. The following states used National Committee for Quality Assurance 2017 specifications: NV (Medicaid) and OR.

Unless otherwise specified, the measurement period for this measure was March 1, 2016 to February 28, 2017. NV reported data for CY 2017.

The Child Core Set specifications include guidance for calculating this measure using the administrative method. Unless otherwise specified, the administrative data source is the state's MMIS and/or data submitted by managed care plans, including behavioral health plans.

Denominators are assumed to be the measure-eligible population for states using the administrative method. Some states reported exclusions from the denominator, as noted in the state-specific comments below.

= Rate not reported because denominator is less than 30.

ADHD = Attention-Deficit/Hyperactivity Disorder; CCO = Coordinated Care Organization; CHIP = Children's Health Insurance Program; CMS = Centers for Medicare & Medicaid Services; CPT = Current Procedural Terminology; CY = Calendar Year; ED = Emergency Department; EPSDT = Early and Periodic Screening, Diagnostic, and Treatment; EQRO = External Quality Review Organization; FFS = Fee for Service; FFY = Federal Fiscal Year; HEDIS = Healthcare Effectiveness Data and Information Set; HMO = Health Maintenance Organization; ICD = International Classification of Diseases; LOINC = Logical Observation Identifiers Names and Codes; MACPro = Medicaid and CHIP Program System; MCO = Managed Care Organization; MMIS = Medicaid Management Information System; NCQA = National Committee for Quality Assurance; NR = Not Reported; PCCM = Primary Care Case Management; PCP = Primary Care Practitioner.

State-Specific Comments:

AL: Medicaid rates include FFS and PCCM populations.

Table ADD-CH (continued)

AL:	CHIP rates include separate CHIP population. Rates exclude children enrolled in Medicaid-expansion CHIP; these children are included in the state's Medicaid rates. State applied optional exclusion of children with a diagnosis of narcolepsy.
AK:	Rates include FFS population.
AR:	Rates include FFS and PCCM populations. Rates were audited by the state's data contractor.
CA:	Rates include FFS and managed care populations (26 MCOs).
CT:	Rates include FFS population. Rates were audited by a certified HEDIS auditor.
DE:	Rates include managed care population (1 MCO), representing 86 percent of the population. Rates exclude FFS population and enrollees in one MCO, representing 14 percent of the population.
DC:	Rates include managed care population (3 MCOs), representing 66 percent of the population. Rates exclude FFS population and one MCO, representing 34 percent of the population. MCO rates were audited by certified HEDIS auditors.
FL:	Rates include FFS, PCCM, and managed care populations (21 MCOs). MCO rates were audited by a certified HEDIS auditor.
GA:	Rates include FFS and managed care populations (4 MCOs). Rates were validated by the state's EQRO.
HI:	Rates include managed care population (5 MCOs). Rates were validated by the state's EQRO.
IL:	Rates include FFS, PCCM, and managed care populations (13 MCOs). State converts Place of Service (POS) codes using a standard conversion to the state's POS codes with specific exceptions to meet the measure specifications. Rates were validated by the state's EQRO.
IN:	Rates include managed care population (3 MCOs), representing more than 90 percent of the population. Rates exclude FFS population, representing less than 10 percent of the population. MCO rates were audited by certified HEDIS auditors.
IA:	Medicaid rates include FFS and managed care populations (3 MCOs). State applied optional exclusion of children with a diagnosis of narcolepsy. Provider types were limited to ensure that non-medical visits were omitted. Provider specialty information is incomplete in the state's data, which may contribute to lower performance on this measure. State attributes performance decline from FFY 2017 to network changes during the year that may have disrupted follow-up services.
IA:	CHIP rates include managed care population (3 MCOs). State applied optional exclusion of children with a diagnosis of narcolepsy. Provider types were limited to ensure that non-medical visits were omitted.
KS:	Rates include managed care population (3 MCOs).
KY:	Rates include managed care population (5 MCOs), representing 95 percent of the population. Rates exclude FFS population, representing 5 percent of the population. Rates were validated by certified HEDIS auditors.
LA:	Rates include FFS and managed care populations (5 MCOs). Rates were calculated using HEDIS-certified code and the state conducted an internal validation of the data. State attributes rate increases from FFY 2017 to an increased focus on this measure as an incentive measure and performance improvement topic.
ME:	Rates include FFS population.
MA:	Rates include PCCM and managed care populations (5 MCOs), representing 74 percent of the population. Rates exclude FFS population, representing 26 percent of the Medicaid population and 18 percent of the CHIP population, but the majority of these children would not have been measure-eligible, including children who have other primary insurance, children with limited Medicaid benefits, children in premium assistance programs, new enrollees who have not yet enrolled in an MCO, and children in state custody.
MI:	Rates include managed care population (11 MCOs), representing 80 percent of the population. Rates exclude FFS population, representing 20 percent of the population. MCO rates were validated by the state's EQRO.
MS:	Medicaid rates include managed care population (2 MCOs), representing 64 percent of the population. Rates exclude FFS population, representing 36 percent of the population.
MS:	CHIP rates include managed care population (2 MCOs).
NV:	Medicaid rates include managed care population (3 MCOs). Rates exclude FFS population.
NV:	CHIP rates include managed care population (3 MCOs). Rates exclude FFS population.

Table ADD-CH (continued)

NH:	Rates include managed care population (2 MCOs), representing 88 percent of the population. Rates exclude FFS population, representing 12 percent of the population. MCO rates were audited by certified HEDIS auditors.
NJ:	Rates include managed care population (5 MCOs), representing 93 percent of the population. Rates exclude FFS population, representing 7 percent of the population.
NM:	Rates include managed care population (4 MCOs). MCO rates were audited by certified HEDIS auditors.
NY:	Rates include managed care population (18 MCOs), representing more than 90 percent of the population. Rates exclude FFS population, representing less than 10 percent of the population. State conducted an internal validation of the data.
NC:	Medicaid rates include FFS and PCCM populations. Rates were validated by an NCQA-certified vendor.
NC:	CHIP rates include FFS and PCCM populations. Rates were validated by an NCQA-certified vendor.
OH:	Rates include managed care population (5 MCOs), representing 93 percent of the population. Rates exclude FFS population, representing 7 percent of the population.
OK:	Rates include FFS and PCCM populations. Rates exclude enrollees in home- and community-based services waivers.
OR:	Rates include managed care population (16 CCOs), representing 88 percent of the population. Rates exclude FFS population, representing 12 percent of the population.
PA:	Rates include managed care population (19 MCOs). Data were submitted by MCOs and compiled by the state's EQRO.
RI:	Rates include managed care population (2 MCOs), representing 85 percent of the population. Rates exclude FFS population, representing 15 percent of the population.
SC:	Rates include managed care population (5 MCOs).
TN:	Medicaid rates include managed care population (4 MCOs). Rates were validated by the state's EQRO.
TN:	CHIP rates include the CHIP Health Plan Administrators and Medical Benefits Managers population. Rates were validated by the state's EQRO.
TX:	Medicaid rates include FFS and managed care populations (34 MCOs). Rates were validated by the state's EQRO.
TX:	CHIP rates include managed care population (17 MCOs). Rates were validated by the state's EQRO.
UT:	Medicaid rates include managed care population (3 MCOs), representing 85 percent of the population. Rates exclude FFS population, representing 15 percent of the population. MCO rates were audited by certified HEDIS auditors.
UT:	CHIP rates include managed care population (2 MCOs). MCO rates were audited by certified HEDIS auditors.
VT:	Rates include statewide 1115 waiver population enrolled in a public non-risk prepaid inpatient health plan population, representing the total Medicaid population.
VA:	Rates include managed care population (6 MCOs). State obtained rates from the NCQA Quality Compass and denominators are not available.
WA:	Rates include managed care population (5 MCOs), representing 97 percent of the population. Rates exclude FFS and PCCM populations, representing 3 percent of the population. Rates also exclude managed care populations who met the continuous eligibility requirement for Medicaid or CHIP but who were not enrolled in a single plan during the continuous enrollment period. Rates were audited by the state's EQRO.
WV:	Medicaid rates include FFS and managed care populations (4 MCOs). State applied optional narcolepsy exclusion. Rates include paid claims only. State attributes lower performance to limited provider availability.
WV:	CHIP rates include FFS population.
WY:	Rates include managed care population (1 MCO).