

**Consensus Core Set: Pediatric Measures
Version 1.0**

Proposed Pediatric Core Measures Set				
NQF #	Measure Title	Measure Steward	Applicable to ACO/PCMH	Description and Comments
<i>Prevention and Wellness</i>				
0038	Childhood Immunization Status (CIS)	NCQA	Applicable to ACOs only	<p>Consensus to include in Core Set using Combination 4</p> <p>Description of Combination 4: Percentage of children 2 years of age who had four diphtheria, tetanus and acellular pertussis (DtaP); three polio (IPV); one measles, mumps and rubella (MMR); three H influenza type B (HiB); three hepatitis B (HepB); one chicken pox (VZV); four pneumococcal conjugate (PCV); one hepatitis A (HepA) by their second birthday. The measure calculates a rate for each vaccine and nine separate combination rates.</p> <p><i>Note 1:</i> Included in Core Set of Children's Health Care Quality Measures for Medicaid and CHIP.</p> <p><i>Note 2:</i> Currently used in Medicaid meaningful use program.</p> <p><i>Note 3:</i> Need for measure steward to consider future exclusions for the flu vaccine shortages which are outside a provider's control.</p>
N/A	Immunizations for Adolescents (IMA)	NCQA	Applicable only to ACOs	<p>Consensus to include in Core Set</p> <p>Description: The percentage of adolescents 13 years of age who had the recommended immunizations by their 13th birthday.</p> <p><i>Note 1:</i> Included in Core Set of Children's Health Care Quality Measures for Medicaid and CHIP.</p> <p><i>Note 2:</i> Updated 2017 IMA measure now includes HPV Vaccine.</p> <p><i>Note 3:</i> 100% compliance with measure may not be achievable due to lack of exclusions for patient refusals for HPV vaccine.</p>

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1448	Developmental Screening in the First Three Years of Life	Oregon Health & Science University	Applicable only to ACOs	<p>Consensus to include in Core Set using hybrid specifications if the measure developer conducts testing at the physician/physician group level.</p> <p>Description: The percentage of children screened for risk of developmental, behavioral and social delays using a standardized screening tool in the first three years of life. This is a measure of screening in the first three years of life that includes three, age-specific indicators assessing whether children are screened by 12 months of age, by 24 months of age and by 36 months of age.</p> <p><i>Note 1:</i> Included in Core Set of Children's Health Care Quality Measures for Medicaid.</p> <p><i>Note 2:</i> 28 states are reporting measure using both reporting methodologies. Provider reporting of measure when using hybrid specifications are low. CMS will continue to work with states on reporting this measure.</p>
0033	Chlamydia Screening for Women	NCQA	Applicable only to ACOs	<p>Consensus to include in core set.</p> <p>Description: The percentage of women 16–24 years of age who were identified as sexually active and who had at least one test for chlamydia during the measurement year.</p> <p><i>Note 1:</i> Included in Core Set of Children's Health Care Quality Measures for Medicaid.</p> <p><i>Note 2:</i> Currently used in Medicaid meaningful use program.</p>

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0024	Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents (WCC)	NCQA	Applicable to ACOs and PCMHs	<p>Consensus to include in core set.</p> <p>Description: Percentage of patients 3-17 years of age who had an outpatient visit with a primary care physician (PCP) or an OB/GYN and who had evidence of the following during the measurement year:</p> <ul style="list-style-type: none"> - Body mass index (BMI) percentile documentation* - Counseling for nutrition - Counseling for physical activity <p>*Because BMI norms for youth vary with age and gender, this measure evaluates whether BMI percentile is assessed rather than an absolute BMI value.</p> <p><i>Note 1:</i> Included in Core Set of Children's Health Care Quality Measures for Medicaid.</p> <p><i>Note 2:</i> Currently used in Medicaid meaningful use program.</p>
1516	Well-Child Visits in the Third, Fourth, Fifth and Sixth Years of Life (W34)	NCQA	Applicable to ACOs and PCMHs	<p>Consensus to include in core set</p> <p>Description: Percentage of patients 3–6 years of age who received one or more well-child visits with a PCP during the measurement year.</p> <p><i>Note 1:</i> Included in Core Set of Children's Health Care Quality Measures for Medicaid.</p>

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<i>Asthma</i>				
1799	Medication Management for People With Asthma (MMA)	NCQA	Applicable to both ACO and PCMH	<p>Consensus to include in core set.</p> <p>Description: The percentage of patients 5-64 years of age during the measurement year who were identified as having persistent asthma and were dispensed appropriate medications that they remained on during the treatment period.</p> <p>Two rates are reported:</p> <ol style="list-style-type: none"> 1. The percentage of patients who remained on an asthma controller medication for at least 50% of their treatment period. 2. The percentage of patients who remained on an asthma controller medication for at least 75% of their treatment period. <p><i>Note 1:</i> Included in Core Set of Children's Health Care Quality Measures for Medicaid.</p> <p><i>Note 2:</i> This measure is included in the ACO/PCMH / primary care core set.</p> <p><i>Note32:</i> Report only on age stratifications relevant to pediatric populations</p>
<i>Overuse</i>				
0002	Appropriate Testing for Children With Pharyngitis (CWP)	NCQA	Applicable to ACOs and PCMHs	<p>Consensus to include in core set</p> <p>Description: The percentage of children 2–18 years of age who were diagnosed with pharyngitis, dispensed an antibiotic and received a group A streptococcus (strep) test for the episode. A higher rate represents better performance (i.e., appropriate testing).</p>

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0069	Appropriate Treatment for Children With Upper Respiratory Infection (URI)	NCQA	Applicable to ACOs and PCMHs	<p>Consensus to include in core set.</p> <p>Description: Percentage of children 3 months to 18 years of age with a diagnosis of upper respiratory infection (URI) who were not dispensed an antibiotic medication.</p> <p><i>Note 1:</i> Currently used in Medicaid meaningful use program.</p>

Future Areas for Measure Development
<ul style="list-style-type: none"> • Improved behavioral health measures for pediatric populations top priority of workgroup • Patient reported outcomes • Net promoter scores • Pediatric CG CAHPS • #0418 - Preventative Care and Screening: Screening for Clinical Depression and Follow-up Plan. Important measure concept but concerns about reporting mechanisms. CMS/HHS push to include depression measures in programs. Consider for version 2.0. • Adolescent well-care visit measure that includes virtual visits • #1800 Asthma Medication Ratio (AMR) measure. Consider for inclusion once additional implementation and testing is conducted • Need a better measure of access that can replace #1516 in future. • Need better measure to replace 0002