



State Improvement Projects, Performance Measures & Incentives Promoting Children’s Preventive Services

December 2018

Acronym Key

ACO - Accountable Care Organization	PCMH - Patient Centered Medical Home
ASO - Administrative Services Organization	PCP - Primary Care Provider
CCO - Coordinated Care Organization	PIHP – Prepaid Inpatient Health Plan
CHIP - Children’s Health Insurance Program	PIP - Performance Improvement Project
DSRIP – Delivery System Reform Incentive Payment	QA&I – Quality Assessment and Improvement
HEDIS Measures - Healthcare Effectiveness Data and Information Set Measures	QI – Quality Improvement
HMO - Health Maintenance Organization	RAE - Regional Accountable Entity
IAP OHI –Medicaid Innovation Accelerator Program Children’s Oral Health Initiative	RAPID PIP - Rapid Cycle Performance Improvement Project; a PIP on an accelerated timeline
MCO - Managed Care Organization	SIM - State Innovation Model
P4P - Pay for Performance	SPA – State Plan Amendment
	VBP – Value Based Payment

State	Behavioral Health (Autism, behavioral/ social-emotional, substance use or depression screening)	Weight (BMI screening) ¹	Immunizations ²	Oral Health (PCP dental referral, caries risk assessment, fluoride provision, or annual dental visit) ³	Well Child/ Adolescent Care ⁴	Lead Screening
Alabama	Provider HEDIS measure	Provider HEDIS measure	Provider HEDIS measure	Provider HEDIS measure ⁵	Provider HEDIS measure	QA&I
Alaska⁶	MCO measure ⁷	MCO measure	MCO measure	MCO measure	MCO measure	
*Arizona	MCO-required PIP	MCO measure	MCO measure	MCO measure	MCO measure	
*Arkansas		PCMH measure ⁸			PCMH measure	
California⁹	Managed Care Health Plan HEDIS Measure		Managed Care Health Plan HEDIS Measure	<ul style="list-style-type: none"> Performance measures¹⁰ Incentive payments¹¹ 	Managed Care Health Plan HEDIS Measures	
Colorado	<ul style="list-style-type: none"> MCO RAPID PIPs MCO P4P RAE and PCP P4P 	<ul style="list-style-type: none"> MCO measure PCP P4P 	<ul style="list-style-type: none"> MCO measures PCP P4P¹² 		<ul style="list-style-type: none"> RAE and PCP P4P MCO measure RAE and MCO RAPID PIP 	
Connecticut¹³	<ul style="list-style-type: none"> SIM Shared Savings Program measure PCMH incentive payment 	ASO performance bonus	ASO performance bonus ¹⁴	<ul style="list-style-type: none"> PCMH incentive payments¹⁵ SIM Shared Savings Program Measure 	<ul style="list-style-type: none"> PCMH incentive payments SIM shared savings program measure 	
*Delaware			MCO measure		MCO measure	MCO HEDIS Measure Reporting

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District of Columbia	Provider incentive			IAP OHI VBP		MCOs – required HEDIS measure reporting
Florida		MCO measure	MCO measure	<ul style="list-style-type: none"> • MCO measures¹⁶ • MCO PIPs 	<ul style="list-style-type: none"> • MCO PIPs • MCO measure 	MCO performance measure
Georgia		MCO performance measure	MCO performance measure	MCO PIP ¹⁷	MCO performance measure	MCO performance measure
Hawaii			Medicaid P4P		Medicaid P4P	
Idaho	PCMH measures (12 and older)	PCMH measure	PCMH measure		Primary care case management measure	
Illinois ¹⁸	MCO incentive payment ¹⁹	MCO P4P measure	<ul style="list-style-type: none"> • MCO P4P Measure • MCO priority measure²⁰ 	MCO priority measure ²¹	MCO P4P measure	
*Indiana					MCO Pay for Outcomes	MCO HEDIS incentive measure
Iowa	MCO quality measure			CHIP PAHP PIP	<ul style="list-style-type: none"> • MCO PIP ²² • ACO quality incentive measures 	
Kansas		MCO measure	Medicaid P4P measures ²³	<ul style="list-style-type: none"> • Medicaid P4P measure²⁴ • MCO measure 	<ul style="list-style-type: none"> • MCO measure • P4P measure 	
Kentucky	MCO – required HEDIS Measure Reporting ²⁵	MCO – required HEDIS measure reporting	MCOs – required HEDIS measure reporting	<ul style="list-style-type: none"> • MCO – required HEDIS measure reporting • MCO PIPs ²⁶ 	MCO – required HEDIS measure reporting	MCO – required HEDIS measure reporting ²⁷
Louisiana		MCO measure	MCO measure	MCO measure ²⁸	<ul style="list-style-type: none"> • MCO measure • P4P measure 	

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*Maine	PCP Incentive Payment		MCO VBP Initiative	MCO VBP Initiative	MCO VBP Initiative	PCP Incentive Payment
Maryland²⁹		MCOs – required HEDIS measure	MCO VBP HEDIS measures		<ul style="list-style-type: none"> MCO VBP HEDIS and state- developed measures Provider incentives 	<ul style="list-style-type: none"> MCO VBP state- developed measure³⁰ MCO Rapid PIP CHIP Health Services Initiative SPA
Massachusetts	<ul style="list-style-type: none"> Required MCO/ACO PIP³¹ ACO measure PIHP P4P measure PIHP QI Pilot³² PIHP QI Workgroup³³ 	Primary Care Clinician (PCC) Plan, MCO, and Accountable Care Partnership Plan (ACPP) ACO Required HEDIS measure reporting	<ul style="list-style-type: none"> ACO measure PCC Plan HEDIS measure reporting 	ACO measure ³⁴	PCC Plan, MCO, ACPP ACO Required HEDIS measure reporting	PCC Plan, MCO, and ACPP ACO required HEDIS measure reporting
Michigan		MCO performance measure	<ul style="list-style-type: none"> MCO PIP MCO performance measure 	IAP OHI VBP	<ul style="list-style-type: none"> MCO PIPs MCO performance measure 	<ul style="list-style-type: none"> SIM measure MCO performance measure
Minnesota	<ul style="list-style-type: none"> MCO measure ACO measure 		<ul style="list-style-type: none"> MCO measure ACO measure 	<ul style="list-style-type: none"> Withhold measure ACO measure³⁵ 	<ul style="list-style-type: none"> MCO measure Withhold measure ACO measure 	
Mississippi		<ul style="list-style-type: none"> MCO PIPs³⁶ MCO measure 	MCO measure		MCO measure	
*Missouri			Required MCO PIP ³⁷	Required MCO PIP ³⁸	Performance Withhold Program ³⁹	MCO Performance Withhold Program ⁴⁰
Montana⁴¹	<ul style="list-style-type: none"> PCMH measure P4P measure 	<ul style="list-style-type: none"> PCMH measure P4P measure 	<ul style="list-style-type: none"> PCMH measure P4P measure 		<ul style="list-style-type: none"> PCMH measure P4P measure 	

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Nebraska	MCO PIP	MCO PIP	MCO PIP	MCO dashboard measures (forthcoming)	MCO measure ⁴²	MCOs – required HEDIS measure reporting ⁴³
*Nevada	<ul style="list-style-type: none"> MCO performance improvement measure MCO RAPID PIPs – Behavioral Health 	<ul style="list-style-type: none"> RAPID MCO PIP MCO performance measure 	MCO performance improvement measure		MCO performance improvement measure	
New Hampshire	MCO PIP DSRIP measure	MCO measure	MCO measure ⁴⁴	IAP OHI VBP	MCO PIPs ⁴⁵	MCO measure
*New Jersey		<ul style="list-style-type: none"> MCO PIPs Provider incentive payment⁴⁶ 	MCOs HEDIS measure ⁴⁷	MCO PIPs ⁴⁸	MCO PIPs	<ul style="list-style-type: none"> MCO HEDIS measure with sanction⁴⁹
New Mexico	<ul style="list-style-type: none"> MCO performance measure MCO PIP 	MCO performance measure	MCO tracking measure		MCO performance measure	MCOs – Required HEDIS measure reporting
*New York		<ul style="list-style-type: none"> PCMH payment incentive MCO measure⁵⁰ 	<ul style="list-style-type: none"> PCMH payment incentive P4P measure MCO measure 		<ul style="list-style-type: none"> PCMH payment incentive P4P measure MCO measure 	<ul style="list-style-type: none"> Part of Medicaid Managed Care Quality Strategy DSRIP P4P measure
North Carolina ⁵¹	MCO PIPs	MCO measure	MCO measure ⁵²			State Medicaid HEDIS Measures Dashboard Measure ⁵³
North Dakota				<ul style="list-style-type: none"> MCO PIP⁵⁴ 	MCO PIP	
Ohio	MCO measure	MCO measure	MCO measure	MCO measure	MCO incentive measure	

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Oklahoma	PCMH Incentive Payment ⁵⁵		<ul style="list-style-type: none"> Incentive payment⁵⁶ HEDIS measure 	MCO HEDIS measure ⁵⁷	<ul style="list-style-type: none"> PCP incentive payments ⁵⁸ MCO HEDIS measure 	MCO HEDIS measure
Oregon	<ul style="list-style-type: none"> CCO PIP⁵⁹ CCO Incentive measures⁶⁰ State performance measure ⁶¹ 	CCO Incentive	<ul style="list-style-type: none"> CCO incentive measure State performance measure 	CCO incentive measures ⁶²	<ul style="list-style-type: none"> CCO PIPs CCO financial incentive measure ⁶³ State performance measure⁶⁴ 	
Pennsylvania	<ul style="list-style-type: none"> MCO performance measure P4P measure 	MCO HEDIS measure	MCO HEDIS measure	<ul style="list-style-type: none"> CHIP performance measure MCO HEDIS measure⁶⁵ Required MCO PIP⁶⁶ P4P measure ⁶⁷ 	<ul style="list-style-type: none"> P4P measure ⁶⁸ MCO HEDIS measure 	<ul style="list-style-type: none"> CHIP MCO PIP MCO HEDIS measure
Rhode Island	<ul style="list-style-type: none"> MCO performance measure 	MCO performance measure	MCO performance measure ⁶⁹		MCO performance measure	<ul style="list-style-type: none"> SIM-Aligned ACO Measure and Primary Care Measure MCO performance measure
South Carolina	<ul style="list-style-type: none"> MCO HEDIS measure MCO performance measure 	<ul style="list-style-type: none"> MCO QIP MCO HEDIS measure MCO performance measure 	MCO HEDIS measure		MCO performance measure ⁷⁰	

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South Dakota						
Tennessee ⁷¹	MCO HEDIS measure	<ul style="list-style-type: none"> • SIM-PCMH/VBP measure • MCO HEDIS measure 	<ul style="list-style-type: none"> • P4P measure • SIM-PCMH measure • MCO HEDIS measure 	<ul style="list-style-type: none"> • MCO PIP • MCO HEDIS measure⁷² 	<ul style="list-style-type: none"> • P4P Incentive Payment⁷³ • MCO PIP • SIM-PCMH/VBP measure • MCO HEDIS measure 	MCO HEDIS measure
Texas	<ul style="list-style-type: none"> • DSRIP measure • MCO performance measure • MCO PIPs⁷⁴ • VBP measures 	<ul style="list-style-type: none"> • DSRIP measure • MCO performance measure • MCO PIPs 	<ul style="list-style-type: none"> • DSRIP measure • MCO performance measure⁷⁵ • P4P measure⁷⁶ • VBP measures 	<ul style="list-style-type: none"> • DSRIP measure • Dental managed care organization (DMO) performance measures • P4P measures⁷⁷ • DMO PIPs • VBP measures 	<ul style="list-style-type: none"> • DSRIP measure • MCO performance measures⁷⁸ • P4P measures⁷⁹ • MCO PIPs • VBP measures 	
*Utah			MCO Performance measures ⁸⁰		MCO PIPs	
Vermont	ACO performance measure		MCO measure	MCO measures ⁸¹	<ul style="list-style-type: none"> • ACO performance measure • MCO measures • PCMH Quality Performance Payment 	

State	Behavioral Health (Autism, behavioral/ social-emotional, substance use or depression screening)	Weight (BMI screening) ¹	Immunizations ²	Oral Health (PCP dental referral, caries risk assessment, fluoride provision, or annual dental visit) ³	Well Child/ Adolescent Care ⁴	Lead Screening
Virginia ^{82 83}	MCO PIP	MCO measure	<ul style="list-style-type: none"> • MCO measure⁸⁴ • P4P measure • MCO HEDIS measures • Performance Incentive Payment/ Penalties 	MCO HEDIS measures ⁸⁵	<ul style="list-style-type: none"> • MCO measure⁸⁶ • MCO HEDIS measures 	MCO measure
Washington		MCO measure	<ul style="list-style-type: none"> • MCO measure • P4P measure 		<ul style="list-style-type: none"> • MCO measure⁸⁷ • P4P measure⁸⁸ • MCO PIP⁸⁹ 	P4P measure
*West Virginia	Required MCO measure	Required MCO measure	Required MCO measure	Required MCO measure	<ul style="list-style-type: none"> • Required MCO measure • MCO PIPs (2 MCOs) 	MCO measure
*Wisconsin	MCO PIPs (1 MCO)		<ul style="list-style-type: none"> • MCO P4P measure • MCO PIP⁹⁰ 	<ul style="list-style-type: none"> • MCO P4P measure • MCO PIPs 	Required MCO measure	<ul style="list-style-type: none"> • HMO Core Reporting Measure⁹¹ • HMO Performance Incentive with Penalty
Wyoming ⁹²	PCMH P4P Measure		PCMH P4P Measure			

* The 2018 information NASHP compiled about this state has not yet been confirmed by the state's Medicaid agency.

Notes: Sources include state quality strategy documents, contracts, external quality reports, and correspondence with state Medicaid officials. This chart focuses on preventive services. States have treatment-related incentives and measures that are not reflected in this chart.

This project is supported by the Health Resources and Services Administration (HRSA) of the US Department of Health and Human Services (HHS) under the Supporting Maternal and Child Health Innovation in States Grant (Grant No. U1XMC31658; \$398,953). This information or content and conclusions are those of the authors and should not be construed as the official position or policy of, nor should any endorsements be inferred by HRSA, HHS or the US Government.

Endnotes

¹ As of federal fiscal year (FFY) 2017, 37 states report on the Centers for Medicare & Medicaid Services (CMS) Child Core Set Measure for BMI Assessment. AL, AZ, AR, CA, ID, ME, MO, ND, OH, OR, SD, VT, WI, and WY do not report this measure. See the CMS 2018 Child Core Set Chart Pack, available at: <https://www.medicaid.gov/medicaid/quality-of-care/downloads/performance-measurement/2018-child-chart-pack.pdf>.

² As of FFY 2017, 41 states report on the CMS Child Core Set Measure for Childhood Immunization Status; 42 states report on one or both of the CMS Child Core Set Measures for Adolescent Immunization Status. AK, AR, AZ, ME, ND, OH, and SD do not report the three immunization measures. OR, TX, and WI do not report the childhood measure.

³ As of FY 2017, 50 states report on the CMS Child Core Set Measure for Percentage of Eligible who Received Preventive Dental Services. ID does not report.

⁴ As of FY 2017, 49 states report on the CMS Child Core Set Measures for Well Child Visits in the First 15 Months of Life, for Adolescent Well-Care Visits, and for Well Child Visits in the 3rd, 4th, 5th, and 6th Years of Life. ND does not report any of these measures. CA does not report Well Child Visits in the First 15 Months of Life or Adolescent Well-Care Visits. SD does not report on Well-Child Visits in the 3rd, 4th, 5th, and 6th Years of Life.

⁵ Annual dental visit

⁶ Alaska has adopted the American Academy of Pediatrics (AAP) Bright Futures Guidelines for Preventive Pediatric Health Care in state regulation, the Alaska Administrative Code. With the passage of SB 74, the AK Health Care Reform Bill, in the 2016 Legislative Session, there will be opportunity to incorporate some of the CMS CHIPRA children's quality measures that AK currently reports to CMS at the state level into some of the proposed alternative payment models outlined in this legislation at the practice/system level.

⁷ This measure addresses evidence-based behavioral health screenings and assessments for children.

⁸ Percentage of patients 3-17 years of age who had an outpatient visit with a PCP or Obstetrician/Gynecologist (OB/GYN) and who had evidence of height, weight, and body mass index (BMI) percentile documentation during the measurement period (all payer).

⁹ Medi-Cal managed care plans use the AAP Bright Futures periodicity schedule. Medi-Cal fee-for-service providers are currently transitioning to the AAP Bright Futures periodicity schedule.

¹⁰ Measures for dental managed care plans/providers include: Annual dental visits, use of preventive services, use of sealants, count of sealants, count of fluoride varnishes, use of diagnostic services, treatment/prevention of caries, exams/oral health evaluations, and preventive services to fillings ratio.

¹⁷ Incentive payments are available to dental providers as part of California's Dental Transformation Initiative. Incentive payments are for increased preventive services utilization for children, caries risk assessment and disease management, and increased continuity of care.

¹² 13 year olds who have received the meningococcal, Tdap and HPV vaccines

¹³ Connecticut Medicaid is not using any managed care arrangements and is structured as a managed, fee-for-service program. The Department of Social Services contracts with 4 ASOs to administer medical, behavioral health, dental and non-emergency medical transportation services. ASOs administer our person-centered medical home (PCMH) and quality improvement program so and are in turn, paid an incentive to create improvements in service that include continuously improved provider adherence to expectations such as Bright Futures.

¹⁴ The ASO performance bonus measures the number of 13 year old adolescents with meningococcal, TDAP, and HPV vaccines.

¹⁵ Annual dental visit and connection to dental services

¹⁶ Annual dental visit and sealants

¹⁷ At least one MCO has a PIP to increase preventive dental services inclusive of the provision of fluoride varnish.

¹⁸ The *Handbook for Providers of Healthy Kids Services* (2015) adopts the Bright Futures periodicity schedule. The Bright Futures periodicity is used for CMS-416 calculations of the Line 10 participation ratio, as well as other lines, per CMS' guidance document. The handbook is incorporated by reference into MCO contracts. So, in addition to FFS providers, MCOs must follow the Bright Futures periodicity schedule as well as other handbook policies.

¹⁹ Beginning in CY2020 CMS Health Home Core Set Measure CDF-HH (Screening for Clinical Depression and Follow-Up Plan) becomes an annual incentive payment for MCOs and Integrated Health Homes; metabolic monitoring for children and adolescents on antipsychotics becomes an annual incentive payment for MCOs.

²⁰ Beginning in CY2020 HEDIS childhood immunization status becomes an annual incentive payment for MCOs and Integrated Health Homes, and immunizations for adolescents becomes a priority measure for MCOs.

²¹ Beginning in 2020 HEDIS Annual Dental Visit becomes a priority measure for MCOs.

²² Iowa uses the AAP Bright Futures periodicity schedule for measures related to Well-Child visits

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- ²³ KanCare (Kansas Medicaid) Pay for Performance Measure includes both Child and Adolescent Immunizations
- ²⁴ KanCare (Kansas Medicaid) Pay for Performance Measure for Annual Dental Visits
- ²⁵ MCOs required to report KY Specific Measure: Adolescent Preventive Screening /Counseling for tobacco, alcohol, substance use and sexual activity
- ²⁶ 3 MCO PIPs for dental: a) Increasing Annual Dental Visits, b) 2016 Healthy Smiles, and c) Pediatric Oral Health
- ²⁷ MCOs required to report the following HEDIS measure: Lead Screening in Children.
- ²⁸ Annual dental visit
- ²⁹ Maryland has a statewide ASO Carve-out for behavioral health and required depression screenings, along with a statewide ASO Carve-out for oral health.
- ³⁰ Measure: Lead Screenings for Children Ages 12-23 Months.
- ³¹ This PIP targets both adults and children.
- ³² The pilot focuses on pediatric substance use disorder screening, intervention, and referral with incentives for achievement of milestones.
- ³³ PIHP QI substance use disorder workgroup to create a recovery-oriented system of care with incentives for achievement of milestones.
- ³⁴ Percentage of ACO Attributed Members under age 21 years who received a comprehensive or periodic oral evaluation as a dental service within the measurement period.
- ³⁵ Annual dental visit
- ³⁶ MCO PIPs must address obesity for children and adults. These PIPs may include preventive activities such as weight counseling.
- ³⁷ Required MCO PIP for number of 2 year olds immunized
- ³⁸ Each MCO defined “improving oral health” differently. Some aimed to improve number of dental chairs while others had goals such as mass distribution of toothbrushes.
- ³⁹ This measure will be phased out in favor of HEDIS ratings, beginning July 1, 2019.
- ⁴⁰ Release of withheld capitation payment if MCO meets the measure.
- ⁴¹ Montana also participates in the US Centers for Disease Control and Prevention (CDC) Immunization Barrier Project. This project is funded by a CDC cooperative agreement. It aims for state Medicaid agencies to collaborate with public health and immunization information system partners to increase immunization rates among low-income children and pregnant women.
- ⁴² Adolescent well-care visits
- ⁴³ Measure: Lead Screening in Children. MCOs required to report performance measures identified in RFPs, including a HEDIS measure on lead screening in children.
- ⁴⁴ Combination 2: Measures the percentage of children 2 years of age during 2016 who were given the required immunizations listed in Combination 2 by their second birthday. Combination 10: Measure the percentage of children 2 years of age during 2016 who were given the immunizations listed in Combination 10 by their second birthday. (Childhood Immunization Status)
- ⁴⁵ Well-Child Visits for 3-to-6-Year-Olds
- ⁴⁶ Provider BMI Incentive - \$10 will be paid, once per year, per member, Eligible members are ages 3 to 17.
- ⁴⁷ Combination 2, 3, and 9
- ⁴⁸ HEDIS Measure: Preventative Oral Evaluations and Dental Services for Children and Adults.
- ⁴⁹ Lead Screening Sanction if lead rates are below 80%. Between 80-60% a corrective action plan is required; below 60% is a refund of capitation paid.
- ⁵⁰ Weight Assessment and Nutrition and Physical Activity Counseling for Children and Adolescents
- ⁵¹ North Carolina Medicaid operates in a FFS and Pediatric Medical Home environment. NC has implemented federal EPSDT medical necessity definition. In addition to required Lead Testing, autism screens, emotional/behavioral, and health risk screens (including BMI screening) are reimbursed in addition to the core reimbursement for the periodic visit. This includes maternal depression screens. Additional payments are also offered for vaccine administration, fluoride applications, and adolescent health risk screens.
- ⁵² Combination 2
- ⁵³ HEDIS measure for lead screening for children in Medicaid reported on state Medicaid dashboard.
- ⁵⁴ Percentage of eligible children that received preventative dental services
- ⁵⁵ Behavioral health screening is a mandated service in PCMHs for ages 5 and above (quarterly incentive payment). While Bright Futures recommends depression screening beginning at age 11, Oklahoma Medicaid requires it at age 5.
- ⁵⁶ The 4th DTaP incentive’s purpose is to improve the health of children by promoting immunization prior to the second birthday.
- ⁵⁷ Annual dental visit

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- ⁵⁸ Oklahoma Medicaid uses the AAP Bright Futures periodicity schedule. Incentive payment to PCPs that meet or exceed the compliance rate for EPSDT screenings as well as incentivize PCPs to perform more initial and periodic screening services.
- ⁵⁹ (depression screening)
- ⁶⁰ Relevant CCO Incentive Measures include: Mental, physical, and dental health assessments within 60 days for children in Department of Human Services (DHS) custody and Depression Screening and Follow Up Plan (this measure is not pediatric-specific).
- ⁶¹ Depression screening and follow-up plan
- ⁶² Dental Sealants on permanent molars for children; Mental, physical, and dental health assessments within 60 days for children in DHS custody
- ⁶³ Mental, physical, and dental health assessments within 60 days for children in DHS custody
- ⁶⁴ Well-child visits in the first 15 months of life
- ⁶⁵ Annual dental visit
- ⁶⁶ Improving Access to Pediatric Preventive Dental Care
- ⁶⁷ Annual Dental Visit, Ages 2 to 20 Years
- ⁶⁸ Well-Child Visits in First 15 months of Life (6 or months visits) and Adolescent Well Care Visits.
- ⁶⁹ Childhood Immunization Status—Combination 3 and 10.
- ⁷⁰ Well-Child Visits in the First 15 Months of Life (HEDIS Measures)
- ⁷¹ All of the contracted MCOs are required to submit a full set of HEDIS and CAHPS data to TennCare. The reports include PIP, Pop Health, EPSDT, dental and more.
- ⁷² Annual dental visit
- ⁷³ Adolescent well-care visits
- ⁷⁴ PIP topics can be found at <https://hhs.texas.gov/about-hhs/process-improvement/medicaid-chip-quality-efficiency-improvement/performance-improvement-projects>
- ⁷⁵ Childhood immunization status, combination 2, 4, 10; immunizations for adolescents, combination 1, 2
- ⁷⁶ CHIP P4P measure: Childhood immunization status, combination 10
- ⁷⁷ Dental service measures include sealants for children 6-9 and 10-14, topical fluoride, and oral evaluation.
- ⁷⁸ Well-Child Visits in the First 15 Months of Life; Well Child Visits in the Third, Fourth, Fifth and Sixth Years of Life; Adolescent Well-Care Visits
- ⁷⁹ CHIP P4P measure: Adolescent Well-Care Visits
- ⁸⁰ Immunizations for Adolescents—Combination 1 (HEDIS). Childhood Immunization Status—Combination 3 (HEDIS)
- ⁸¹ Annual dental visit
- ⁸² This reflects Medallion 4.0 contract information, not Commonwealth Coordinated Care Plus, which serves children and adults with complex conditions.
- ⁸³ For all measures in this row except developmental screening, Virginia Medicaid requires the MCOs to report on the measures. For developmental screening, it is not a “deliverable of the contractor;” the state tracks performance based on claims and encounter data.
- ⁸⁴ Childhood Immunization Status.
- ⁸⁵ Annual dental visit
- ⁸⁶ Well-Child Visits in the First 15 Months of Life; Well Child Visits in the Third, Fourth, Fifth and Sixth Years of Life; Adolescent Well-Care Visits
- ⁸⁷ Annual dental visit
- ⁸⁸ Well Child Visits in the Third, Fourth, Fifth and Sixth Years of Life
- ⁸⁹ MCOs are required to conduct 3 PIPs, one of which must focus on improving well-child visit rates among infants, children and adolescents
- ⁹⁰ “Childhood immunizations” implemented by 4 MCOs; “Immunizations for Adolescents” implemented by 2
- ⁹¹ BadgerCare+ HMOs only.
- ⁹² Wyoming is non-Medicaid managed care state. However, through the PCMH program, the state offers additional PMPM payments to providers if they “meet certain requirements, such as reporting clinical quality measures.”