

Children's

Value Based Payment Quality Measure Set Measurement Year 2024



INTRODUCTION

The Measurement Year (MY) 2024 Children's Quality Measure Set was created in collaboration with the Children's Health, Primary Care (Physical Health), Maternity Care, and Behavioral Health/ Health and Recovery Plans (HARP) Clinical Advisory Groups (CAGs), as well as the New York State Department of Health (NYS DOH) CAG Strategy team. The goal of this measure set is to align with measures put forth in the NYS Quality Assurance Reporting Requirements (QARR), the Healthcare Effectiveness Data and Information Set® (HEDIS)¹ Technical Specifications for Health Plans, the Centers for Medicare & Medicaid Services (CMS) Core measure set, and the Merit-based Incentive Payment System (MIPS), where applicable. The measure set is designed to encourage providers to meet high standards of patient-centered clinical care and coordination across multiple care settings.

MEASURE SELECTION AND FEASIBILITY

Upon receiving recommendations from the CAGs, the release of guidelines from national measure stewards, such as the National Committee for Quality Assurance (NCQA)/HEDIS® and CMS, and in accordance with the NYS Value Based Payment (VBP) Roadmap,² the State defined a final list of measures to be included in the Children's Measure Set for MY2024. For MY2024 there are a total of eighteen Category 1 and 2 Children's Quality Measures (QM).

VBP ARRANGEMENT REQUIREMENTS FOR MY2024 - HEALTH EQUITY

In MY2022, NCQA added race and ethnicity stratification for five HEDIS measures to help promote transparency in health plan performance; another eight were added for MY2023. By doing so, NCQA hopes to better identify where disparities exist so they can be addressed. They also hope to identify and learn from top performers in areas where disparities don't exist. To align with this initiative, starting in July 2022, NYS requires payers and providers to incorporate race and ethnicity measure stratification in VBP arrangements. For MY2024, HEDIS added nine additional measures for race and ethnicity stratification, totaling 22 measures spanning numerous domains and VBP arrangement types.

Stratification Specifications:

Payers are <u>required</u> to include <u>at least one</u> of the following measures in <u>all level 1 or higher</u>
 VBP contracts and stratify results by race and ethnicity categories as outlined in the HEDIS
 MY2024 specifications.³

NCQA Measure Name	Measure Inclusion by Arrangement Type				
NCQA Measure Name	TCGP	HARP/BH	Maternity	HIV/AIDS	Children's
Adult Immunization Status (AIS-E)	✓				
Asthma Medication Ratio (AMR)	✓	✓		✓	✓
Breast Cancer Screening (BCS-E)	✓	✓		✓	
Cervical Cancer Screening (CCS; CCS-E)*	✓	✓		✓	
Child and Adolescent Well-Care Visits (WCV)	✓				✓
Childhood Immunization Status (CIS; CIS-E)*	✓				✓
Colorectal Cancer Screening (COL-E)	✓	✓		✓	

¹ HEDIS® is a registered trademark of the National Committee for Quality Assurance (NCQA).

² New York State Department of Health, Medicaid Redesign Team, Value Based Payment: Update, May 2022. (Link)

³ HEDIS® Measurement Year 2024 Volume 2 Technical Specification for Heath Plans, General Guidelines section, page 28



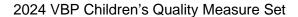


NCQA Measure Name	Measure Inclusion by Arrangement Type				
NCQA Measure Name	TCGP	HARP/BH	Maternity	HIV/AIDS	Children's
Controlling High Blood Pressure (CBP)	✓	✓		✓	
Eye Exam for Patients with Diabetes (EED)*	✓	✓		✓	
Follow-Up After Emergency Department Visit for Mental Illness (FUM)*	✓	✓			✓
Follow-Up After Emergency Department Visit for Substance Use (FUA)	✓	✓			
Follow-Up After Hospitalization for Mental Illness (FUH)*	✓	✓			
Glycemic Status Assessment for Patients with Diabetes (GSD) (Formerly Hemoglobin A1c - HBD)	√	✓		√	
Immunizations for Adolescents - Combo 2 (IMA, IMA-E)	✓				✓
Initiation and Engagement of Substance Use Disorder Treatment (IET)	✓		✓	✓	
Kidney Health Evaluation for Patients with Diabetes (KED)*	✓	✓		✓	
Pharmacotherapy for Opioid Use Disorder (POD)	✓	✓			
Postpartum Depression Screening and Follow- Up (PDS-E)*			✓		
Prenatal and Postpartum Care (PPC)	✓		✓		
Prenatal Depression Screening and Follow-Up (PND-E)*			✓		
Prenatal Immunization Status (PRS-E)*	✓		✓		
Well-Child Visits in the First 30 Months of Life (W30)	✓				✓

^{*} Added for MY2024

Stratification Requirements:

- 1. Stratification of selected measures is to be classified as pay-for-reporting (P4R).
- 2. Payers are <u>required</u> to include the following details in the Provider Contract Statement and Certification form (DOH-4255) and Contract language:
 - i. Indicate what measure(s) are included for race and ethnicity stratification.
 - ii. Indicate how the stratified measure results for applicable measures will be shared with the VBP contractor.
- 3. Plans are required to include the race and ethnicity data to NYS using the following method:
 - i. Race and ethnicity fields have been added to the annual VBP member attribution submission file specifications. This will allow the State to stratify measure performance by





race and ethnicity categories for applicable performance measures at the VBP contract and VBP Contractor levels.

All new contracts submitted on or after <u>July 1, 2022</u>, must meet this requirement to be approved by NYS DOH. As of <u>April 1, 2023</u>, all other existing contracts were to be updated/amended at the end of the contract's current measurement period and before the contract's next measurement period began.

MEASURE CLASSIFICATION

Each measure has been designated by the State as Category 1, 2, or 3 with associated recommendations for implementation and testing for future use in VBP Arrangements. The measures below are classified by category based on an assessment of reliability, validity, and feasibility, and according to the suggested method of use (either Pay for Reporting (P4R) or Pay for Performance (P4P)).



Category 1

Category 1 quality measures as identified by the CAGs and accepted and deemed reportable by the State are to be reported by VBP Contractors to the Managed Care Organizations (MCOs). These measures are intended to be used to determine the amount of shared savings for which VBP contractors are eligible.⁴ At least one Category 1 P4P measure must be included in a VBP contract.

The State classified each Category 1 measure as either P4P or P4R:

- P4P measures are intended to be used in the determination of shared savings amounts for which VBP Contractors are eligible. In other words, these are the measures on which payments in VBP contracts may be based. Measure performance can be considered in both the determination of the target budget and in the calculation of shared savings for VBP Contractors.
- P4R measures are intended to be used by the MCOs to incentivize VBP Contractors for reporting data to monitor the quality of care delivered to members under a VBP contract. Incentives for reporting should be based on timeliness, accuracy, and completeness of data. Measures can be reclassified from P4R to P4P or vice versa through annual CAG and State review or as determined by the MCO and VBP Contractor.

Not all Category 1 measures will be reportable for the measurement year, as reporting on some of these measures will be phased in over the next few years. Please refer to the 2024-2025 *Value-Based Payment Reporting Requirements Technical Specifications Manual* (MY2024) for details as to which measures must be reported for the measurement year. This manual will be updated annually, in line with the release of the final VBP measure sets for the subsequent year.

⁴ New York State Department of Health, Medicaid Redesign Team, Value Based Payment: Update, May 2022. (Link)



Categories 2 and 3

Category 2 measures have been accepted by the State based on the agreement of clinical importance, validity, and reliability but flagged as presenting concerns regarding implementation feasibility.

Measures designated as Category 3 were identified as unfeasible at this time or as presenting additional concerns including accuracy or reliability when applied to the attributed member population for an arrangement, therefore Category 3 measures are not included in the measure set.

MY2024 CHILDREN'S QUALITY MEASURE SET

The measures provided on the following pages are recommendations for MY2024. Note that measure classification is a State recommendation and implementation is to be determined between the MCO and VBP Contractor.

Measure sets and classifications are considered dynamic and will be reviewed annually. Updates will include measure additions, deletions, recategorizations, and/or reclassifications from P4R to P4P or vice versa, based on experience with measure implementation in the prior year. Please see Appendix A for a full list of these changes.

Category 1 Measures

The table below displays the *Category 1 MY2024 Children's Quality Measure Set*, arranged alphabetically and includes the measure title, measure steward, and the measure classification. The measure set is redlined to highlight changes made between MY2023 and MY2024; please refer to the key at the end of this table for an explanation of redlined formatting.

Children's Measures	Measure Steward	Classification
Asthma Admission Rate (PDI 14)	Agency for Healthcare Research and Quality (AHRQ)	P4R
Asthma Medication Ratio (AMR)	NCQA	P4P
Child and Adolescent Well-Care Visits (WCV)	NCQA	P4P
Childhood Immunization Status – Combination 3 (CIS; CIS-E)	NCQA	P4P
Chlamydia Screening in Women (CHL)	NCQA	P4P
COVID-19 Immunization Measure (CVS)^	NYS	P4P
Depression Remission or Response for Adolescents and Adults (DRR-E)	NCQA	P4P



2024 VBP Children's Quality Measure Set

Children's Measures	Measure Steward	Classification
Depression Screening and Follow-Up for Adolescents and Adults (DSF-E)	NCQA	P4P
Developmental Screening in the First Three Years of Life (DEV-N)^	Oregon Health & Science University/NYS	P4R
Follow-Up After Emergency Department Visit for Mental Illness (FUM)*	NCQA	P4P
Follow-Up Care for Children Prescribed ADHD Medication (ADD, ADD-E)	NCQA	P4R
Immunizations for Adolescents – Combination 2 (IMA, IMA-E)	NCQA	P4P
Oral Evaluation, Dental Services (OED)	NCQA	P4R
Social Need Screening and Intervention (SNS-E)^	NCQA	P4R P4P
Topical Fluoride for Children (TFC)	NCQA	P4R
Use of First-Line Psychosocial Care for Children and Adolescents on Antipsychotics (APP)*	NCQA	P4R
Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents (WCC)	NCQA	P4R
Well-Child Visits in the First 30 Months of Life (W30)^	NCQA	P4P



CATEGORY 2

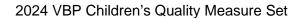
The table below displays the Category 2 MY2024 Children's Quality Measure Set and includes the measure title and measure steward. All Category 2 measures are classified as P4R in MY2024. Category 2 measures were reviewed in detail this year and streamlined to include only those with an active measure steward and/or potential for movement to Category 1 in subsequent years. The measure set is redlined to highlight changes made between MY2023 and MY2024; please refer to the key at the end of this table for an explanation of redlined formatting.

Children's Measures	Measure Steward
Follow-Up After Emergency Department Visit for Alcohol and Other Drug Abuse or Dependence (FUA)	NCQA
Follow-up After Emergency Department Visit for Mental Illness (FUM)	NCQA
Maternal Depression Screening	NCQA
Postpartum Depression Screening and Follow-up (PDS-E)*	NCQA
Screening for Reduced Visual Acuity and Referral in Children	CMS
Topical Fluoride for Children at Elevated Caries Risk, Dental Services	American Dental Association (ADA)
Use of First-Line Psychosocial Care for Children and Adolescents on Antipsychotics	NCQA

^{*}New Measure MY2024 Measure Retired/Removed for MY2024



Appendix A

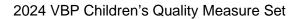




The table below identifies the changes to the Category 1 and 2 measures for the MY2024 Children's Quality Measure Set.

Category 1 Measure Changes from 2023 to 2024

Measure Name	Change	Rationale for Change
Asthma Admission Rate – PDI #14	Measure removed	Steward no longer measure
Childhood Immunization Status -Combination 3 (CIS)(CIS-E)	HEDIS Stratified Measure	Added to NCQA list of Race and Ethnicity measures – New for MY2024
COVID-19 Immunization Measure (CVS)	Measure reporting specifications revised by NYS for MY2024	Refer to Quality Assurance Reporting Requirements (QARR) Technical Specifications for MY2024.
Developmental Screening Using Standardized Tool, First Three Years of Life (DEV-N)	Measure reporting specifications/steward revised by NYS for MY2024	Refer to Quality Assurance Reporting Requirements (QARR) Technical Specifications for MY2024.
Follow-Up After Emergency Department Visit for Mental Illness (FUM)	New CAT 1 Measure	Category change
Follow-Up Care for Children Prescribed ADHD Medication (ADD-E)	Measure reporting specifications revised by NCQA for HEDIS MY2024	ECDS Reporting only
Social Need Screening and Intervention (SNS-E)	Classification change	Second year measure; changed to P4P.
Use of First-Line Psychosocial Care for Children and Adolescents on Antipsychotics (APP)	New CAT 1 Measure	Category change
Well-Child Visits in the First 30 Months of Life (W30)	Measure specifications revised by NCQA for HEDIS MY2024	Telehealth component remove





Category 2 Measure Changes from 2023 to 2024

Measure Name	Change	Rationale for Change
Follow–Up After Emergency Department Visit for Substance Use (FUA)*	Measure removed from Children's MY2024 CAT 2 measure set	Measure difficult to manage in pediatric population
Follow-up After Emergency Department Visit for Mental Illness (FUM)	Measure removed from Children's MY2024 CAT 2 measure set	Category change
Maternal Depression Screening	Measure removed from Children's MY2024 CAT 2 measure set	Replaced by PDS-E
Postpartum Depression Screening and Follow-up (PDS-E)	New Measure	Replaced maternal depression screening
Topical Fluoride for Children, Dental Services	Measure removed from Children's MY2024 CAT 2 measure set	Replace by NCQA measure, category change
Use of First-Line Psychosocial Care for Children and Adolescents on Antipsychotics (APP)	Measure removed from Children's MY2024 CAT 2 measure set	Category change