

Potential List of Pediatric Measures to Add to the Common Measure Set (DRAFT - as of July 8, 2016)

Measure	Measures Steward	NQF-Endorsed	Category	Type of Data Needed	Product Line	Brief Measure Description	Notes	Likely Units of Analysis	
1	Initiation and Engagement of Alcohol and Other Drug Dependence Treatment (IET)	NCQA HEDIS	Yes #0004	Alcohol and Drug	Claims	Commercial Medicaid	The percentage of adolescent members with a new episode of alcohol or other drug (AOD) dependence who received the following: (1) initiate treatment through an inpatient AOD admission, outpatient visit, intensive outpatient encounter or partial hospitalization within 14 days of diagnosis; and (2) initiated treatment and who had two or more additional services with a diagnosis of AOD within 30 days of the initiation visit.	Can report for ages 13-17 years (separately from adults). Insurance benefits must include medical and chemical dependency.	Likely only at health plan level; numbers too small at medical group level
2	Identification of Alcohol and Other Drug Services (IAD)	NCQA HEDIS	No	Alcohol and Drug	Claims	Commercial Medicaid	This measure summarizes the number and percentage of members with an alcohol and other drug claim who received chemical dependency services during the measurement year.	Age groupings: 0-12; 13-17, broken out by gender; Requires chemical dependency benefit.	Likely only at health plan level; numbers too small at medical group level
3	Appropriate Treatment for Children with Upper Respiratory Infection (URI)	NCQA HEDIS	Yes #0069	Appropriate Treatment	Claims	Commercial Medicaid	The percentage of children 3 months - 18 years who were given a diagnosis of upper respiratory infection (URI) and were not dispensed an antibiotic prescription.	This measure is not in the Common Measure Set but the Alliance currently publicly reports on this.	State, county/ACH, some medical groups/clinics
4	Acute Otitis Externa: Systemic Antimicrobial Therapy – Avoidance of Inappropriate Use	American Academy of Otolaryngology	Yes #0654	Appropriate Treatment	Claims and Medical Record	NA	Percentage of patients aged 2 years and older with a diagnosis of AOE who were not prescribed systemic antimicrobials.	Requires medical record info including documentation of medical reason(s) for prescribing systemic antimicrobial therapy (e.g., coexisting diabetes, immune deficiency) - which is an exclusion in the measure spec.	Not sure - small cell size will be a problem
5	Acute Otitis Externa: Topical Therapy	American Academy of Otolaryngology	Yes #0653	Appropriate Treatment	Claims and Medical Record	NA	Percentage of patients aged 2 years and older with a diagnosis of AOE who were prescribed topical preparations.	Requires medical record info including documentation of medical reason(s) for not prescribing topical preparations (eg, coexisting acute otitis media, tympanic membrane perforation) - which is an exclusion in the measure spec.	Not sure - small cell size will be a problem
6	Annual number of asthma patients (>1 year old) with >1 asthma-related emergency room (ER) visit	State of Alabama Medicaid Program	No	Appropriate Treatment	Claims	Commercial? Medicaid	Numerator is the number of asthma patients (> 1 year) with asthma-related ER visit; denominator is all children > 1 year diagnosed with asthma or treatment with at least 2 short-acting beta adrenergic agents during the measurement year.	Would need to secure detailed measure specifications that are not currently readily available.	Not sure - small cell size will be a problem
7	Asthma - Short-Acting Beta Agonist Inhaler for Rescue Therapy	ActiveHealth Management	Yes #0620	Asthma	Claims and Medical Record	NA	The percentage of patients 2 years or older with asthma who have a refill for a short-acting beta agonist in the past 12 months.	Requires access to medical record for exclusion criteria in the measure spec.	Not sure - small cell size will be a problem

8	Asthma Medication Ratio (AMR)	NCQA HEDIS	Yes #1800	Medication Management	Claims	Commercial Medicaid	The percentage of members 5-85 years of age who were identified as having persistent asthma and had a ratio of controller medications to total asthma medications of 0.50 or greater during the measurement year.	Could report for children ages 5-18. There is already an asthma medication measure in the CMS, includes ages 5-85.	State, county/ACH, some medical groups/clinics
9	Follow-up Care for Children Prescribed ADHD medication (ADD)	NCQA HEDIS	Yes #0108	Medication Management	Claims	Commercial Medicaid	The percentage of children newly prescribed attention-deficit/hyperactivity disorder (ADHD) medication who had at least three follow-up care visits within a 10-month period, one of which was within 30 days of when the first ADHD medication was dispensed.	Pertains to ages 6-12 years; two rates reported (initiation phase and continuation phase)	State, county/ACH, some medical groups/clinics
10	Metabolic Monitoring for Children and Adolescents on Antipsychotics (APM)	NCQA HEDIS	Yes #2800	Medication Management	Claims	Commercial Medicaid	The percentage of children and adolescents 1-17 years of age who had two or more antipsychotic prescriptions and had metabolic testing.	Metabolic testing for blood glucose and LDL-C	State, county/ACH
11	Use of Multiple Concurrent Antipsychotics in Children and Adolescents (APC)	NCQA HEDIS	No	Medication Management	Claims	Commercial Medicaid	The percentage of children and adolescents 1-17 years of age who were on two or more concurrent antipsychotic medications.		State, county/ACH
12	Use of First-Line Psychosocial Care for Children and Adolescents on Antipsychotics (APP)	NCQA HEDIS	Yes #2801	Medication Management	Claims?	Commercial Medicaid	The percentage of children and adolescents 1-17 years of age who had a new prescription for an antipsychotic medication and had documentation of psychosocial care as first-line treatment.	Concerned that claims will not reliably pick up psychosocial documentation.	Not sure - small cell size will be a problem
13	Antipsychotic Use in Children Under 5 Years Old	Pharmacy Quality Alliance	Yes #2337	Medication Management	Claims	NA	The percentage of children under age 5 who were dispensed antipsychotic medications during the measurement period.		State, county/ACH
14	Opioid Prescribing for Children and Adolescents	Suggested by Dr. Gary Franklin	No	Medication Management	Claims	NA	Percent of children less than 20 years old receiving a prescription for opioids for an acute condition who receive \leq 3 days of a short acting opioid.	This would be a homegrown measure and someone would need to develop the measure specifications with detailed code sets.	State, county/ACH
15	Annual Dental Visit (ADV)	NCQA HEDIS	No-Endorsement Removed	Oral Health	Claims	Medicaid	The percentage of members 2-20 years of age who had at least one dental visit during the measurement year. This measure applies only if dental care is a covered benefit in the Medicaid contract.	Applies to Medicaid-insured only.	Managed Medicaid Organizations
16	Ambulatory Care Sensitive Emergency Department Visits for Dental Caries in Children	American Dental Association	Yes #2689	Oral Health	Claims	NA	Number of emergency department visits for caries-related reasons per 100,000 member months for all enrolled children (ages 0 - 20)	Access to robust source of dental data limited to Medicaid at this time.	Not sure - likely Medicaid only
17	Pediatric All-Condition Readmission Measure	Center of Excellence for Pediatric Quality Measurement	Yes #2393	Patient Safety	Claims	NA	This measure calculates case-mix-adjusted readmission rates, defined as the percentage of admissions followed by 1 or more readmissions within 30 days, for patients less than 18 years old. The measure covers patients discharged from general acute care hospitals, including children's hospitals.	Will need to access detailed measure specifications which are not currently readily available.	Select hospitals
18	Pediatric Patient Safety for Selected Indicators (PDI 19) - Composite Measure	Agency for Healthcare Research & Quality	No - Endorsement Removed	Patient Safety	Claims	?	Pediatric Patient Safety for Selected Indicators (PDI 19) is a weighted average of the observed-to-expected ratios for the following component indicators: PDI 01 Accidental Puncture or Laceration Rate, PDI 02 Pressure Ulcer Rate, PDI 05 Iatrogenic Pneumothorax Rate, PDI 10 Postoperative Sepsis Rate, PDI 11 Postoperative Wound Dehiscence Rate, and PDI 12 Central Venous Catheter-Related Blood Stream Infection Rate.	Complicated measure to program	Select hospitals

19	Lead Screening in Children (LSC)	NCQA HEDIS	No	Screening	Claims	Medicaid	The percentage of children 2 years of age who had one or more capillary or venous lead blood test for lead poisoning by their second birthday.		Not sure - small cell size will be a problem
20	Non-Recommended Cervical Cancer Screening in Adolescent Females (NCS)	NCQA HEDIS	No	Screening	Claims	Commercial Medicaid	The percentage of adolescent females 16-20 years of age who were screened unnecessarily for cervical cancer.		State, county/ACH
21	Well Child Visits in the First Fifteen Months of Life (W15)	NCQA HEDIS	No	Screening	Claims	Commercial Medicaid	The percentage of members who turned 15 months old during the measurement year and who had the following number of well-child visits with a PCP during their first 15 months of life: No well child visits, one well child visit, two well child visits, three well child visits, four well child visits, five well child visits, six or more well child visits.	Well Child Visits in years 3-6 currently in Common Measure Set.	State, county/ACH, medical groups
22	Utilization of the PHQ-9 to Monitor Depression Symptoms for Adolescents and Adults	NCQA HEDIS	No	Screening	Medical Record	NA	The percentage of members 12 years of age and older with a diagnosis of major depression or dysthymia who have a PHQ-9 or PHQ-A tool administered at least once during a four-month period.	No data source within Washington for broad public reporting	
23	Audiological Evaluation no later than 3 months of age	Centers for Disease Control and Prevention	Yes #1360	Screening	Medical Record	NA	This measure assesses the percentage of newborns who did not pass hearing screening and have an audiological evaluation no later than 3 months of age.	No data source within Washington for broad public reporting	
24	Blood Pressure Screening by 13 Years of Age	NCQA	Yes #1552	Screening	Medical Record	NA	The percentage of adolescents 13 years of age who had a blood pressure screening with results during the measurement year or the year prior to the measurement year.	No data source within Washington for broad public reporting	
25	Blood Pressure Screening by 18 Years of Age	NCQA	Yes #1553	Screening	Medical Record	NA	The percentage of adolescents 18 years of age who had a blood pressure screening with results during the measurement or the year prior to the measurement year.	No data source within Washington for broad public reporting	
26	Child and Adolescent Major Depressive Disorder (MDD): Suicide Risk Assessment	AMA-convened Physician Consortium for Performance Improvement	Yes #1365	Screening	Medical Record	NA	Percentage of patient visits for those patients aged 6 through 17 years with a diagnosis of major depressive disorder with an assessment for suicide risk	No data source within Washington for broad public reporting	
27	Depression Screening By 13 years of age	NCQA	Yes #1394	Screening	Medical Record	NA	The percentage of adolescents 13 years of age who had a screening for depression using a standardized tool.	No data source within Washington for broad public reporting	
28	Depression Screening By 18 Years of Age	NCQA	Yes #1515	Screening	Medical Record	NA	The percentage of adolescents 18 years of age who had a screening for depression using a standardized tool.	No data source within Washington for broad public reporting	

29	Developmental Screening in the First Three Years of Life	Oregon Health Sciences University	Yes #1448	Screening	Claims?	NA	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.	Concerned that claims may not reliably pick up screening?	State, county/ACH?
30	Hearing screening prior to hospital discharge	Centers for Disease Control and Prevention	Yes #1354	Screening	Medical Record	NA	This measure assesses the proportion of births that have been screened for hearing loss before hospital discharge.	Per Deb Doyle: The Department of Health has a surveillance and tracking system where they compile newborn screening data submitted by hospitals and midwives. They can indicate that they can provide these data.	Hospitals
31	Maternal Depression Screening	NCQA	Yes #1401	Screening	Medical Record	Commercial Medicaid	The percentage of children 6 months of age who had documentation of a maternal depression screening for the mother.	No data source within Washington for broad public reporting	
32	Preventive Care and Screening: Screening for Clinical Depression and Follow-Up Plan	CMS	Yes #0418	Screening	Medical Record	Commercial Medicaid	Percentage of patients aged 12 years and older screened for clinical depression using an age appropriate standardized tool AND follow-up plan documented	No data source within Washington for broad public reporting	
33	Developmental screening using a parent completed screening tool	Child and Adolescent Health Measurement Initiative	Yes #1385	Screening	Patient Reported, Survey	NA	The measure assesses whether the parent or caregiver completed a developmental screening tool meant to identify children at-risk for developmental, behavioral and social delays. The items are age-specific and anchored to parent-completed tools (a majority of health care providers implementing the Bright Futures recommendations for standardized screening for all children utilize parent-completed tools due to their validity and feasibility). The age-specific items assess whether children 10-71 months are screened.	No data source within Washington for broad public reporting	
34	Screening for Reduced Visual Acuity and Referral in Children	CMS	Yes #2721	Screening	Medical Record	Commercial Medicaid	The percentage of children who received visual acuity screening at least once by their 6th birthday; and if necessary, were referred appropriately.	No data source within Washington for broad public reporting	
35	Frequency of Selected Procedures (FSP)	NCQA HEDIS	No	Utilization	Claims	Commercial Medicaid	This measure summarizes the utilization of frequently performed procedures that often show wide regional variation and have generated concern regarding potentially inappropriate utilization: bariatric weight loss surgery (ages 0-19); tonsillectomy (ages 0-9);.		Health plans
36	Ambulatory Care (AMB)	NCQA HEDIS	No	Utilization	Claims	Commercial Medicaid	This measure summarizes utilization of ambulatory care in the following categories: outpatient visits, ED visits. Results reported as visits per 1,000 member months.	Age groupings: <1, 1-9, 10-19	Health plans
37	Inpatient Utilization-General Hospital Acute Care (IPU)	NCQA HEDIS	No	Utilization	Claims	Commercial Medicaid	This measure summarizes utilization of acute inpatient care and services in the following categories: total inpatient, maternity, surgery, medicine.	Age groupings: <1, 1-9, 10-19 (only 10-19 for maternity)	Health plans

38	Mental Health Utilization (MPT)	NCQA HEDIS	No	Utilization	Claims	Commercial Medicaid	The number and percentage of members receiving the following mental health services during the measurement year: any service, inpatient, intensive outpatient or partial hospitalization, outpatient or ED	Age groupings: 0-12; 13-17, broken out by gender	Health plans
39	Antibiotic Utilization (ABX)	NCQA HEDIS	No	Utilization	Claims	Commercial Medicaid	This measure summarizes the following data eight categories of outpatient utilization of antibiotic prescriptions during the measurement year, stratified by age and gender.	Age groupings: 0-9, 10-17	Health plans

There are a number of other measures from the Child and Adolescent Health Measurement Initiative. Unfortunately, all of them require access to medical record and/or patient survey data.