

Developmental Screening in the First Three Years of Life¹

Measure Basic Information

Name and date of specifications used:

CMS Core set of Children's Health Care Quality Measures for Medicaid and CHIP, Updated February 2018

URL of Specifications: <https://www.medicaid.gov/medicaid/quality-of-care/downloads/medicaid-and-chip-child-core-set-manual.pdf>

Measure Type:

HEDIS ☐ PQI ☐ Survey ☐ Other ☒ Specify: CMS & Oregon Health & Science University

Measure Utility:

CCO Incentive ☒ State Quality ☒ CMS Adult Core Set ☐ CMS Child Core Set ☒ Other ☐
Specify:

Data Source: MMIS/DSSURS

Measurement Period: January 1, 2019 – December 31, 2019

2013 Benchmark: 50%; from Metrics and Scoring Committee consensus

2014 Benchmark: 50%; from Metrics and Scoring Committee consensus

2015 Benchmark: 50%; from Metrics and Scoring Committee consensus

2016 Benchmark: 50%; from Metrics and Scoring Committee consensus

2017 Benchmark: 60.1%; 2015 CCO 75th percentile

2018 Benchmark: 74.0%; 2016 CCO 90th percentile

2019 Benchmark: 80.0%; from Metrics and Scoring Committee consensus

2019 Improvement Targets: Minnesota method with 3 percentage point floor

Incentive Measure changes in specifications from 2018 to 2019:

None.

Note the 'Clarification for coding and billing for developmental screening' is removed from the specifications sheet, as the same information can be found in the guidance document.

Member type: CCO A ☒ CCO B ☒ CCO G ☐

Specify claims used in the calculation:

| DEV | Claim from matching CCO | Denied claims included |
|-----------------|-------------------------|------------------------|
| Numerator event | Y | Y |

¹ NQF 1448, but NQF is no longer endorsing the measure. Aside from deviations noted overleaf, OHA uses the CMS core measure set specifications.

Measure Details

Data elements required denominator: Children who turn 1, 2, or 3 years of age in the measurement year and had continuous enrollment in a CCO for the 12 months prior to their birthdate in the measurement year, regardless of if they had a medical/clinical visit or not in the measurement year. See Core Set of Children's Health Care Quality Measures for details.

Required exclusions for denominator: None.

Deviations from cited specifications for denominator: None.

Data elements required numerator: Children in the denominator who had a claim with CPT code 96110 in the 12 months preceding the birthday in the measurement year. See new Clarification section below.

Required exclusions for numerator: N/A

Deviations from cited specifications for numerator: If the claim was for CPT 96110, the claim was included regardless of the inclusion of any modifiers. This deviates from published specifications.

What are the continuous enrollment criteria: Enrollment must be continuous for one year prior to the birthday in the measurement year, with maximum of a 45 day gap.

What are allowable gaps in enrollment: No more than one gap in continuous enrollment of up to 45 days in the 12 months prior to the birthday in the measurement year.

Define Anchor Date (if applicable): Child's birthdate in the measurement year.

For more information: The Developmental Screening guidance document and supporting documents can be found at <http://www.oregon.gov/oha/HPA/ANALYTICS/Pages/CCO-Baseline-Data.aspx> and <http://www.oregon.gov/OHA/HPA/CSI-TC/Pages/Resources-Metric.aspx>