

Children and Adolescents Access to Primary Care Practitioners

Measure Basic Information

Name and date of specifications used: HEDIS® 2016 Technical Specifications for Health Plans (Volume 2)

URL of Specifications:

n/a

Measure Type:

HEDIS PQI Survey Other Specify:

Measure Utility:

CCO Incentive Core Performance CMS Adult Set CHIPRA Set State Performance
Other Specify:

Data Source:

MMIS/DSSURS

Measurement Period: January 1 – December 31, 2016

2013 Benchmark (2011 National Medicaid 75th percentile):

- 12-24 months: 98.2%
- 25 months – 6 years: 91.6%
- 7-11 years: 93.0%
- 12-19 years: 91.7%
- Average of all ages: 93.6%

2014 Benchmark (2013 National Medicaid 75th percentile):

- 12-24 months: 97.8%
- 25 months – 6 years: 91.2%
- 7-11 years: 93.3%
- 12-19 years: 91.8%
- Average of all ages: 93.5%

2015 Benchmark (2014 National Medicaid 75th percentile):

- 12-24 months: 97.9%
- 25 months – 6 years: 91.7%
- 7-11 years: 93.5%
- 12-19 years: 92.2%
- Average of all ages: 93.8%

2016 Benchmark (2015 National Medicaid 75th percentile):

- 12-24 months: 97.4%
- 25 months – 6 years: 91.2%

- 7-11 years: 93.9%
- 12-19 years: 92.4%

Average of all ages: 93.7%

Measure changes in specifications from 2015 to 2016:

OHA is using HEDIS® 2016 specifications for all 2016 measurements. There were no changes between HEDIS® 2015 and HEDIS® 2016. To note, HEDIS® 2016 included ICD-10 diagnosis codes in the Ambulatory Visits Value Set.

HEDIS specifications are written for multiple lines of business and include a broad set of codes that could be used for measurement. OHA is not using all codes listed in the HEDIS specifications. Codes OHA is not using include, but are not limited to, LOINC, CPT, and HCPCS codes that are not open to Medicaid in Oregon. A general rule of thumb is that only CPT/HCPCS codes associated with the prioritized list will be used to calculate the measures; however as some measure specifications include denied claims, a claim that was denied because it included codes not on the prioritized list might still be counted toward the measure.

Denied claims: Included Not included

Member type: CCO A CCO B CCO G

Measure Details

Data elements required denominator:

Children ages 12 months to 19 years as of December 31st of the measurement year who meet continuous enrollment criteria. Four age stratifications are used:

- 12-24 months as of December 31st of the measurement year.
- 25 months – 6 years as of December 31st of the measurement year.
- 7-11 years as of December 31st of the measurement year.
- 12-19 years as of December 31st of the measurement year.

See HEDIS® 2016 Technical Specification for Health Plans (Volume 2) for additional details.

Required exclusions for denominator:

See continuous enrollment criteria.

Deviations from cited specifications for denominator:

None.

Data elements required numerator:

Children ages 12 months – 19 years that had a visit (with a primary care provider) containing appropriate service codes in respective time window.

- For children ages 12 – 24 months and 25 months – 6 years: one or more visits with a PCP (Ambulatory Visits Value Set) during the measurement year.
- For children ages 7-11 and 12-19 years: one or more visits with a PCP (Ambulatory Visits Value Set) during the measurement year or the year prior to the measurement year.

See HEDIS® 2016 Technical Specifications for Health Plans (Volume 2) for codes to identify ambulatory or preventive care visits.

Required exclusions for numerator:

See deviations below.

Deviations from cited specifications for numerator:

OHA did not limit the services to certain types of providers. There was no differentiation between any ambulatory provider types. As long as children or adolescents had claims with the codes described in the HEDIS specifications during the appropriate time frame, they are counted as having at least one numerator visit during the measurement period. This is a deviation from HEDIS® specifications, which indicate specialist visits should be excluded.

What are the continuous enrollment criteria:

For children 12 months – 6 years of age, the measurement year.

For children ages 7 – 19 years of age, the measurement year and the year prior to the measurement year.

What are allowable gaps in enrollment:

For children 12 months – 6 years of age, no more than one gap in enrollment of up to 45 days during the measurement year.

For children ages 7 – 19 years of age, no more than one gap in enrollment of up to 45 days during each year of continuous enrollment.

Define Anchor Date (if applicable):

December 31 of the measurement year.