



Medi-Cal Children's Health Advisory Panel

March 18, 2015

Sources to Consider for the DHCS Children's Dashboard

1. DHCS Managed Care Dashboard Indicators

a) All of the children's non-EQRO audited HEDIS measures that DHCS can calculate using the managed care encounter data:

- HPV – Human papillomavirus vaccine for female adolescents.
- LSC – Lead screening in children.
- CHL – Chlamydia screening in women (includes adolescent rate).
- CWP – Appropriate testing for children with pharyngitis.
- URI – Appropriate treatment for children with upper respiratory infection.
- ASM – Use of appropriate medication for people with asthma (rates for age stratification).
- AMR – Asthma medication ratio (rates for age stratification).
- ADD – Follow-up care for children prescribed ADHD medication.
- FUH – Follow-up after hospitalization for mental illness (6 years and older).
- APC – Use of multiple concurrent antipsychotics in children and adolescents.
- APM – Metabolic monitoring for children and adolescents on antipsychotics.
- ADV – Annual dental visit (rates for age stratification).
- APP – Use of first-line psychosocial care for children and adolescents on antipsychotics.
- W15 – Well-child visits in the first 15 months of life.
- AWC – Adolescents well-care visits.

b) All of the children's EQRO audited HEDIS measures:

- WCC* – Weight assessment and counseling for nutrition and physical activities for children/adolescents (includes three rates: WCC-BMI, WCC-N, and WCC-PA).
- CIS* – Childhood immunization status.
- IMA* – Immunization for adolescents.
- MMA* – Medication management for people with asthma (includes two reporting rates that can be stratified by age).
- CAP* – Children and adolescents' access to primary care practitioners (includes four reporting rates).
- W34* – Well-child visits in the third, fourth, fifth and sixth years of life.
- AMB* – Ambulatory care (includes two reporting rates that can be stratified by age: ED visits and outpatient visits).

*Measure has been reported on the DHCS Medi-Cal Managed Care Performance Dashboard

**Measure has been reported on the CMS Annual CARTS Report

- c) CAHPS health plan survey 5.0H, Child Version available data:
- Rating of all health care*
 - Rating of health Plan*
 - Rating of personal doctor*
 - Rating of specialist seen most often*
 - Custom service*
 - Getting care quickly*
 - Getting needed care*
 - How well doctors communicate*
 - Shared decision making*
 - Health promotion and education*
 - Coordination of care*
- d) Example of other non-HEDIS children's measures that DHCS can calculate using the encounter data:
- DEV – Developmental screening in the first three years of life.

2. CMS Annual CARTS Report Indicators

PPC-CH** - Timeliness of Prenatal Care

FPC-CH - Frequency of Ongoing Prenatal Care

LBW-CH - Live Births weighing less than 2,500 grams

PC02-CH - Cesarean section for Nulliparous Singleton Vertex

CIS-CH** - Childhood immunization status

IMA-CH** - Immunization status for adolescents

WCC-CH - Weight assessments and counseling for nutrition and physical activity for children/adolescents: BMI assessments for children/adolescents

DEV-CH - Developmental screening in the first three years of life

CHL-CH - Chlamydia screening in women

W15-CH - Well-child visits in the first 15 months of life

W34-CH** - Well-child visits in the third, fourth, fifth and sixth years of life

AWC-CH - Adolescent well-care visit

PDENT-CH - Percentage of eligible that received preventative dental services

CAP-CH** - Child and adolescent access to primary care practitioners

TDENT-CH - Percentage of eligible that received dental treatment services

AMB-CH** - Ambulatory care – Emergency Department visits

CLABSI-CH - Pediatric central line – associated blood stream infections – neonatal intensive care unit and pediatric intensive care unit

ADD-CH - Follow-up care for children prescribed ADHD medication

FUH-CH - Follow-up after hospitalization for mental illness

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**Measure has been reported on the CMS Annual CARTS Report

CPC-CH** - Consumer Assessment of Healthcare Providers and Systems (CAHPS) 5.0H child version including Medicaid and children with chronic conditions supplemental items

HPV-CH - PMV Vaccine for female adolescents

BHRA-CH - Maternity care – behavioral health risk assessment

MMA-CH** - Medication management for people with asthma

3. DHCS Strategy for Quality Improvement in Health Care (Quality Strategy)

- a) In 2015, Managed Care Plans in collaboration with DHCS will focus Quality Improvements efforts on maternal and child health including timely postpartum and immunizations of 2-year old children.
- b) CCS/California Perinatal Quality Care Collaborative (CPQCC) High Risk Infant Follow-up Quality Care initiative
 - Identify infants who might develop CCS-eligible conditions after discharge from a CCS-approved Neonatal Intensive Care Unit
 - Improve the neurodevelopmental outcomes of infants served by CCS HRIF Programs through collaboration between CMS, CCS and CPQCC.
- c) Maternal Health Initiative
 - 9-month QI project to improve the rate of timely postpartum care as well as to improve the quality of postpartum services delivered, including access to breastfeeding counseling and services, effective contraception, and ensuring follow-up for medical conditions during and after pregnancy.
- d) Increase of Children's use of preventative dental services
 - Increase the rate of children enrolled in Medi-Cal who receive any preventative service by 10% points over 5-years.
 - Increase the rate of children between 6-9 years of age who receive sealants by 10% points over 5-years.

4. Let's Get Healthy California Task Force Final Report Indicators

- Infant mortality, deaths per 1,000 live births
- All doses of recommended vaccines for children 19-35 months
- Responses indicating at least 1 type of adverse childhood experience
- Reduction of nonfatal child maltreatment incidents per 1,000 children
- Proportion of third grade students whose reading skills are at or above proficient level
- Emergency department visits, 0-17 years due to asthma per 10,000

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**Measure has been reported on the CMS Annual CARTS Report

- Percentage of “physically fit” children who score 6 of 6 on the required California school Fitness-gram test.
- Proportion of adolescents who meet physical activity guidelines for aerobic physical activity.
- Adolescents who drank 2 or more glasses of soda or other sugary drinks yesterday
- Adolescents who have consumed fruits and vegetables five or more times per day.
- Proportion of children and adolescents who are obese or overweight.
- Proportion of adolescents who smoked cigarettes in the past 30 days.
- Frequency of sad or hopeless feelings in past 12 months.
- Percentage of children who walk/bike/skate to school

5. National Quality of Care for the Children in Medicaid and CHIP Indicators

a) Primary Care Access and Preventative Care

- Child and adolescent access to primary care practitioners
- Well-child visits in the first 15 months of live
- Well-child visits in the third, fourth, fifth and sixth years of life
- Adolescent well-care visits
- Childhood immunization status
- Immunization status for adolescents
- Chlamydia screening in women
- BMI assessment for children and adolescents

b) Perinatal Health

- Timeliness for prenatal care
- Frequency of ongoing prenatal care

c) Management of Acute and Chronic Conditions

- Appropriate testing for children with Pharyngitis
- Follow-up after hospitalization for mental illness
- Follow-up care for children prescribed ADHD/ADD medication
- Central line-associated blood stream infections in neonatal intensive care units

d) Dental and oral Health Services

- Preventative Dental Services (PDENT)
- Dental Treatment Services (TDENT)

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