



**Department
of Health**

Children's

Value Based Payment Quality Measure Set
Measurement Year 2020

INTRODUCTION

The Measurement Year (MY) 2020 Children's Quality Measure Set was created in collaboration with the Children's Health Clinical Advisory Group (CAG), VBP Measure Support Task Force, as well as the New York State (NYS) Value Based Payment (VBP) Workgroup. The goal of this measure set is to align with measure sets put forth in the Delivery System Reform Incentive Payment (DSRIP) Program, for the Quality Assurance Reporting Requirements (QARR), and the Merit-based Incentive Payment System (MIPS), where applicable. The Children's measure set was designed to encourage providers to meet high standards of patient-centered clinical care and coordination across multiple care settings for the child and adolescent population.

MEASURE SELECTION AND FEASIBILITY

During the spring and fall of 2019, the Children's Health CAG reconvened and made recommendations to the State on quality measures, data collection, data reporting, and support required for providers to be successful in a VBP environment.

Beginning in June of 2017, the State initiated regular meetings of the VBP Measure Support Task Force. The goal of the Task Force is to make recommendations to the State to support and inform during the Annual Measure Review Cycle. Members of the Task Force include professionals from various Managed Care Organizations (MCOs), VBP Pilot Contractors, Clinical Subject Matter Experts, and State Agencies, along with other professionals who have experience in quality measurement and health information technology. The Task Force provides feedback to the Department of Health (DOH) on quality measure feasibility, reporting, and calculation.

Upon receiving the CAG recommendations and Task Force feedback, the State defined a final list of measures for consideration for MY2020. For MY2020, 18 measures have remained unchanged, 1 measure has been added, 1 measure changed categories, and 2 measures change class. This culminates in a total of 22 Category 1 and 2 Children's Quality Measures.

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 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 MCOs. These measures are also intended to be used to determine the amount of shared savings for which VBP contractors are eligible¹. At least one Category 1 P4P measure must be included in a VBP contract.

Categorizing and Prioritizing Quality Measures



CATEGORY 1

Approved quality measures that are deemed to be clinically relevant, reliable, valid, and feasible.



CATEGORY 2

Measures that are clinically relevant, valid, and reliable, but where the feasibility could be problematic. These measures were investigated during the 2017 & 2018 pilot programs.



CATEGORY 3

Measures that are insufficiently relevant, valid, reliable and/or feasible.

¹ New York State Department of Health, Medicaid Redesign Team, A Path Toward Value Based Payment: Annual Update, September 2019. [\(Link\)](#)



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. Measures can be included 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 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 *Value Based Payment Reporting Requirements Technical Specifications Manual* (MY2020) for details as to which measures must be reported for the measurement year. This manual will be updated annually each fall, in line with the release of the final VBP measure sets for the subsequent year.

Categories 2 and 3

Category 2 measures have been accepted by the State based on agreement of clinical importance, validity, and reliability, but flagged as presenting concerns regarding implementation feasibility. Some of these measures have been further investigated in the VBP Pilots. The State has discussed measure testing approaches, data collection, and reporting requirements with VBP Pilots as a part of the Measure Support Task Force.

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.

MY2020 CHILDREN'S QUALITY MEASURE SET

The measures and State-determined classifications provided on the following pages are recommendations for MY2020. 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. During 2020, the CAGs and the VBP Workgroup will re-evaluate measures and provide recommendations for MY2020. Please see [Appendix A](#) for a full list of these changes.

Note: Additional changes may have been made to the names for some of the measures presented below to ensure alignment with the naming conventions used by the official measure steward. There have not been any changes to the measure specifications associated with these name changes.



Category 1 Measures

The table below displays the Category 1 MY2020 Children’s Quality Measure Set, arranged alphabetically, and includes measure title, measure steward, the National Quality Forum (NQF) number and/or other measure identifier (where applicable), and State-recommended classification for measure use. The measure set is redlined to highlight changes made between MY2019 and MY2020. Additions/changes are made in red text, while deletions are made in red text with a strikethrough. Between the MY2019 and MY2020 Children’s Measure sets; 1 measure has been added, 1 measure changed categories, and 2 measures change class.

Children’s Measures	Measure Steward	Measure Identifier	Classification
Asthma Admission Rate (PDI 14)	AHRQ	NQF 0728	P4R
Adolescent Preventive Care	NYS		P4R
Adolescent Well-Care Visits	NCQA		P4R
Annual Dental Visit	NCQA	NQF 1388	P4R
Asthma Medication Ratio	NCQA	NQF 1800	P4P
Childhood Immunization Status – Combination 3	NCQA	NQF 2372	P4P
Chlamydia Screening	NCQA	NQF 0033	P4P
Depression Remission or Response for Adolescents and Adults	NCQA		P4P
Developmental Screening in the First Three Years of Life	Oregon Health & Science University	NQF 1448	P4R
Follow-up Care for Children Prescribed ADHD Medication	NCQA	NQF 0108	P4R



Children’s Measures	Measure Steward	Measure Identifier	Classification
Immunization for Adolescents – Combination 2	NCQA	NQF 1407	P4P
Medication Management for People with Asthma	NCQA	NQF 1799	P4P
Preventive Care and Screening: Screening for Clinical Depression and Follow-Up Plan	CMS	NQF 0418	P4R
Weight Assessment and Counseling for Nutrition and Physical Activity for Children and Adolescents	NCQA	NQF 0024	P4R
Well-Child Visits in the First 15 Months of Life	NCQA	NQF 1392	P4P
Well-Child Visits in the Third, Fourth, Fifth, and Six Years of Life	NCQA	NQF 1516	P4P



CATEGORY 2

The table below displays the Category 2 MY2020 Children’s Quality Measure Set and includes measure title, measure steward, and the NQF number and/or other measure identifier (where applicable). All Category 2 measures are classified as P4R in MY2020. The measure set is redlined to highlight changes made between MY2019 and MY2020. There is only 1 change to the Category 2 Children’s measure set for 2020.

Children’s Measures	Measure Steward	Measure Identifier
Developmental Screening in the First Three Years of Life	Oregon Health & Science University	NQF 1448
Follow-up After Emergency Department Visit for Alcohol and Other Drug Dependence	NCQA	NQF 2605
Follow-up After Emergency Department Visit for Mental Illness	NCQA	NQF 2605
Maternal Depression Screening	NCQA	NQF 1401
Screening for Reduced Visual Acuity and Referral in Children	CMS	NQF 2721
Topical Fluoride for Children at Elevated Caries Risk, Dental Services	ADA	NQF 2528
Use of First-Line Psychosocial Care for Children and Adolescents on Antipsychotics	NCQA	NQF 2801



Appendix A



The table below identifies the changes to the Category 1 and 2 measures for the MY2020 Children’s Quality Measure Set.

Category 1 Measure Changes from 2019 to 2020

Measure Name	Change	Rationale for Change
Depression Remission or Response for Adolescents and Adults	Added	Align with VBP Roadmap changes
Developmental Screening in the First Three Years of Life	Moved from Cat 2 to Cat 1	Recommendation of CAG and Task Force
Weight Assessment and Counseling for Nutrition and Physical Activity for Children and Adolescents	Classification Change from P4P to P4R	Recommendation of CAG and Task Force
Well-Child Visits in the Third, Fourth, Fifth, and Six Years of Life	Classification Change from P4P to P4R	Recommendation of CAG and Task Force

Category 2 Measure Changes from 2019 to 2020

Measure Name	Change	Rationale for Change
Developmental Screening in the First Three Years of Life	Moved from Cat 2 to Cat 1	Recommendation of CAG and Task Force