

Table AWC-CH. Percentage of Adolescents Ages 12 to 21 Receiving at Least One Well-Care Visit, as Submitted by States for the FFY 2018 Child Core Set Report (n = 47 states)

State	Population	Methodology	Denominator	Rate
State Mean				49.2
State Median				48.9
Alabama	Medicaid only	Administrative	159,172	46.7
Alabama	CHIP only	Administrative	22,187	34.8
Alaska	Medicaid & CHIP	Administrative	34,788	27.2
Arizona	Medicaid only	Administrative	258,734	39.2
Arkansas	Medicaid & CHIP	Administrative	119,349	38.1
Connecticut	Medicaid & CHIP	Hybrid	354	70.9
Delaware	Medicaid & CHIP	Hybrid	411	57.2
Dist. of Col.	Medicaid & CHIP	Administrative	32,267	55.9
Florida	Medicaid & CHIP	Administrative & Hybrid	674,420	57.0
Georgia	Medicaid & CHIP	Administrative	378,365	44.0
Hawaii	Medicaid & CHIP	Administrative & Hybrid	55,028	47.5
Illinois	Medicaid & CHIP	Administrative	530,031	48.7
Indiana	Medicaid & CHIP	Hybrid	1,533	64.2
Iowa	Medicaid only	Administrative	72,723	38.0
Iowa	CHIP only	Administrative	17,882	44.9
Kansas	Medicaid & CHIP	Administrative & Hybrid	75,803	53.3
Kentucky	Medicaid & CHIP	Hybrid	2,055	50.0
Louisiana	Medicaid & CHIP	Hybrid	2,053	54.2
Maine	Medicaid & CHIP	Administrative	40,049	48.7
Maryland	Medicaid & CHIP	Hybrid	3,152	63.5
Massachusetts	Medicaid & CHIP	Administrative & Hybrid	172,503	67.8
Michigan	Medicaid only	Hybrid	4,308	56.8
Minnesota	Medicaid & CHIP	Administrative	171,948	36.0
Mississippi	Medicaid only	Hybrid	822	40.0
Mississippi	CHIP only	Hybrid	822	47.3
Missouri	Medicaid & CHIP	Hybrid	9,044	44.2
Montana	CHIP only	Administrative	7,269	52.9
Nebraska	Medicaid & CHIP	Administrative	44,495	43.0
Nevada	Medicaid only	Hybrid	822	48.9
Nevada	CHIP only	Hybrid	806	60.1
New Hampshire	Medicaid & CHIP	Hybrid	742	61.2
New Jersey	Medicaid & CHIP	Administrative & Hybrid	247,360	60.2
New Mexico	Medicaid & CHIP	Administrative & Hybrid	114,536	39.4
New York	Medicaid & CHIP	Administrative	768,770	68.3
North Carolina	Medicaid only	Administrative	426,049	39.5
North Carolina	CHIP only	Administrative	49,023	48.5
Ohio	Medicaid & CHIP	Hybrid	2,055	50.4
Oklahoma	Medicaid & CHIP	Administrative	141,389	25.2
Oregon	Medicaid & CHIP	Administrative	106,737	49.4
Pennsylvania	Medicaid & CHIP	Administrative & Hybrid	409,385	63.0
Rhode Island	Medicaid & CHIP	Hybrid	787	64.5
South Carolina	Medicaid & CHIP	Administrative	184,916	39.4
South Dakota	Medicaid & CHIP	Administrative	22,984	32.3
Tennessee	Medicaid only	Hybrid	4,110	53.1
Tennessee	CHIP only	Hybrid	411	40.4
Texas	Medicaid only	Administrative & Hybrid	698,299	66.7
Texas	CHIP only	Hybrid	6,942	65.9
Utah	Medicaid only	Administrative & Hybrid	32,583	44.0
Utah	CHIP only	Administrative & Hybrid	4,104	50.7
Vermont	Medicaid & CHIP	Administrative	25,806	51.6
Virginia	Medicaid & CHIP	Administrative	NR	55.6
Washington	Medicaid & CHIP	Hybrid	2,055	48.0

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State	Population	Methodology	Denominator	Rate
West Virginia	Medicaid only	Administrative	74,139	23.3
West Virginia	CHIP only	Administrative	5,100	47.8
Wisconsin	Medicaid & CHIP	Administrative & Hybrid	NR	43.3
Wyoming	Medicaid only	Administrative	10,000	40.1

Source: Mathematica analysis of MACPro reports for the FFY 2018 reporting cycle. More information on the Child Core Set is available at <https://www.medicaid.gov/medicaid/quality-of-care/performance-measurement/adult-and-child-health-care-quality-measures/child-core-set/index.html>.

Notes: This measure identifies the percentage of adolescents ages 12 to 21 who had at least one comprehensive well-care visit with a primary care practitioner or an obstetrical/gynecological practitioner during the measurement year.

The term "states" includes the 50 states and the District of Columbia.

Means are calculated as the unweighted average of all state rates. When a state reported separate rates for its Medicaid and CHIP populations, the mean and median rates were calculated using the rate for the larger measure-eligible population.

Unless otherwise specified, states used Child Core Set specifications, based on National Committee for Quality Assurance 2018 specifications. The following states used National Committee for Quality Assurance 2017 specifications: NV and OR.

Unless otherwise specified, the measurement period for this measure was January 1, 2017 to December 31, 2017. AZ reported data for FFY 2016.

The Child Core Set specifications include guidance for calculating this measure using the administrative method or the hybrid method. The hybrid method uses a combination of administrative and medical records data to identify services included in the numerator or to determine exclusions from the denominator based on diagnoses or other criteria. Unless otherwise specified, administrative data sources are the state's MMIS and/or data submitted by managed care plans; medical record data sources are paper and/or electronic health records.

Denominators are assumed to be the measure-eligible population for states using the administrative method; states using the hybrid method often reported the sample size for the medical chart review rather than the measure-eligible population. Some states reported exclusions from the denominator, as noted in the state-specific comments below.

ADHD = Attention-Deficit/Hyperactivity Disorder; CCO = Coordinated Care Organization; CHIP = Children's Health Insurance Program; CMS = Centers for Medicare & Medicaid Services; CPT = Current Procedural Terminology; CY = Calendar Year; ED = Emergency Department; EPSDT = Early and Periodic Screening, Diagnostic, and Treatment; EQRO = External Quality Review Organization; FFS = Fee for Service; FFY = Federal Fiscal Year; HEDIS = Healthcare Effectiveness Data and Information Set; HMO = Health Maintenance Organization; ICD = International Classification of Diseases; LOINC = Logical Observation Identifiers Names and Codes; MACPro = Medicaid and CHIP Program System; MCO = Managed Care Organization; MMIS = Medicaid Management Information System; NCQA = National Committee for Quality Assurance; NR = Not Reported; PCCM = Primary Care Case Management; PCP = Primary Care Practitioner.

State-Specific Comments:

AL: Medicaid rate includes FFS and PCCM populations.

AL: CHIP rate includes separate CHIP population. Rate excludes children enrolled in Medicaid-expansion CHIP; these children are included in the state's Medicaid rate.

AK: Rate includes FFS population.

AZ: Rate includes managed care population (7 MCOs), representing 92 percent of the population. Rate excludes FFS population, seriously mentally ill population, Children's Rehabilitative Services (CRS) population, and state long-term care elderly, physically, or developmentally disabled population, representing 8 percent of the population. Rate includes services provided by regional health centers, integrated clinics, and clinics. State conducted an internal validation of the data.

AR: Rate includes FFS and PCCM populations ages 12 to 20. Rate was audited by the state's data contractor.

CT: Rate includes FFS population. Denominator is the sample size; measure-eligible population is 102,166. Rate was audited by a certified HEDIS auditor.

DE: Rate includes managed care population (1 MCO), representing 86 percent of the population. Rate excludes FFS population and enrollees in one MCO, representing 14 percent of the population. Denominator is the sample size; measure-eligible population is 22,559.

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DC:	Rate includes FFS and managed care populations (3 MCOs), representing 74 percent of the population. Rate excludes one MCO, representing 26 percent of the population. Rate was audited in internal validation.
FL:	Rate includes FFS, PCCM, and managed care populations (21 MCOs). Rate was derived using both administrative and hybrid method data. Rates for the FFS population and three MCOs were calculated using the administrative method, while rates for 18 MCOs were calculated using the hybrid method. Denominator is the measure-eligible population. MCO rates were audited by a certified HEDIS auditor.
GA:	Rate includes FFS and managed care populations (4 MCOs). Rate was validated by the state's EQRO.
HI:	Rate includes managed care population (5 MCOs). Rate was derived using both administrative and hybrid method data. One MCO used the administrative method and four MCOs used the hybrid method. Denominator is the measure-eligible population. Rate was validated by the state's EQRO.
IL:	Rate includes FFS, PCCM, and managed care populations (13 MCOs). Rate was validated by the state's EQRO.
IN:	Rate includes managed care population (3 MCOs), representing more than 90 percent of the population. Rate excludes FFS population, representing less than 10 percent of the population. Denominator is the sample size; measure-eligible population is 149,699. MCO rates were audited by certified HEDIS auditors.
IA:	Medicaid rate includes FFS and managed care populations (3 MCOs). State did not use provider specialty to identify visits because that field was not complete in state data.
IA:	CHIP rate includes managed care population (3 MCOs). State did not use provider specialty to identify visits because that field was not complete in state data.
KS:	Rate includes managed care population (3 MCOs). Rate was derived using both administrative and hybrid method data. One MCO used the administrative method and two MCOs used the hybrid method. Denominator is the measure-eligible population.
KY:	Rate includes managed care population (5 MCOs), representing 95 percent of the population. Rate excludes FFS population, representing 5 percent of the population. Denominator is the sample size; measure-eligible population is 198,818. Rate was validated by certified HEDIS auditors.
LA:	Rate includes managed care population (5 MCOs), representing 95 percent of the population. Rate excludes FFS population, representing 5 percent of the population. Denominator is the sample size; measure-eligible population is 188,769. Rate was calculated using HEDIS-certified code and the state conducted an internal validation of the data. State attributes rate increase from FFY 2017 to an increased focus on this measure as an incentive measure.
ME:	Rate includes FFS population.
MD:	Rate includes managed care population (8 MCOs), representing 95 percent of the population. Rate excludes FFS population, representing 5 percent of the population. Denominator is the sample size; measure-eligible population is 194,625. Rate was audited by certified HEDIS auditors.
MA:	Rate includes PCCM and managed care populations (5 MCOs), representing 74 percent of the population. Rate excludes FFS population, representing 26 percent of the Medicaid population and 18 percent of the CHIP population, but the majority of these children would not have been measure-eligible, including children who have other primary insurance, children with limited Medicaid benefits, children in premium assistance programs, new enrollees who have not yet enrolled in an MCO, and children in state custody. Two MCOs and the PCCM program used the administrative method. Three MCOs used the hybrid method. Denominator is the measure-eligible population.
MI:	Rate includes managed care population (11 MCOs), representing 80 percent of the population. Rate excludes FFS population, representing 20 percent of the population. Denominator is the sample size; measure-eligible population is 261,418. MCO rates were validated by the state's EQRO.
MN:	Rate includes FFS and managed care populations (8 MCOs). Rate includes paid claims only. Rate was audited by a certified HEDIS auditor.
MS:	Medicaid rate includes managed care population (2 MCOs), representing 64 percent of the population. Rate excludes FFS population, representing 36 percent of the population. Denominator is the sample size; measure-eligible population is 105,438.
MS:	CHIP rate includes managed care population (2 MCOs). Denominator is the sample size; measure-eligible population is 16,286.
MO:	Rate includes managed care population (3 MCOs), representing 72 percent of the Medicaid population and 49 percent of the CHIP population. Rate excludes FFS population as well as enrollees who did not meet continuous enrollment requirements for an MCO, representing 28 percent of the Medicaid population and 51 percent of the CHIP population. Denominator is the sample size; measure-eligible population is 49,704. MCO rates were audited by a HEDIS certified vendor.

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MT:	Rate includes FFS population. Rate excludes services provided by Federally Qualified Health Centers and Rural Health Clinics because claims for these services are processed separately.
NE:	Rate includes FFS and managed care populations (3 MCOs).
NV:	Medicaid rate includes managed care population (3 MCOs). Rate excludes FFS population. Denominator is the sample size; measure-eligible population is 61,238.
NV:	CHIP rate includes managed care population (3 MCOs). Rate excludes FFS population. Denominator is the sample size; measure-eligible population is 7,348.
NH:	Rate includes managed care population (2 MCOs), representing 88 percent of the population. Rate excludes FFS population, representing 12 percent of the population. Denominator is the sample size; measure-eligible population is 25,820. MCO rates were audited by certified HEDIS auditors.
NJ:	Rate includes managed care population (5 MCOs), representing 93 percent of the population. Rate excludes FFS population, representing 7 percent of the population. Rate was derived using both administrative and hybrid method data. One MCO used the administrative method and four MCOs used the hybrid method. Denominator is the measure-eligible population.
NM:	Rate includes managed care population (4 MCOs). Rate was derived using both administrative and hybrid method data. Two MCOs used the administrative method and two MCOs used the hybrid method. Denominator is the measure-eligible population. MCO rates were audited by certified HEDIS auditors.
NY:	Rate includes managed care population (19 MCOs), representing more than 90 percent of the population. Rate excludes FFS population, representing less than 10 percent of the population. State conducted an internal validation of the data.
NC:	Medicaid rate includes FFS and PCCM populations. Rate was validated by an NCQA-certified vendor.
NC:	CHIP rate includes FFS and PCCM populations. Rate was validated by an NCQA-certified vendor.
OH:	Rate includes managed care population (5 MCOs), representing 93 percent of the population. Rate excludes FFS population, representing 7 percent of the population. Denominator is the sample size; measure-eligible population is 368,336.
OK:	Rate includes FFS and PCCM populations. Rate excludes enrollees in home- and community-based services waivers.
OR:	Rate includes managed care population (16 CCOs), representing 88 percent of the population. Rate excludes FFS population, representing 12 percent of the population. Rate includes well-care visits to any provider type.
PA:	Rate includes managed care population (19 MCOs). Rate was derived using both administrative and hybrid method data. Three MCOs used the administrative method and 16 MCOs used the hybrid method. Denominator is the measure-eligible population. Data were submitted by MCOs and compiled by the state's EQRO.
RI:	Rate includes managed care population (2 MCOs), representing 85 percent of the population. Rate excludes FFS population, representing 15 percent of the population. Denominator is the sample size; measure-eligible population is 42,862.
SC:	Rate includes managed care population (5 MCOs).
SD:	Rate includes FFS population. Rate excludes services provided by Indian Health Service and may not capture all services reimbursed on a per diem basis, such as those provided by Rural Health Clinics and Federally Qualified Health Centers.
TN:	Medicaid rate includes managed care population (4 MCOs). Denominator is the sample size; measure-eligible population is 277,603. State attributes rate increase from FFY 2017 to quality improvement efforts.
TN:	CHIP rate includes the CHIP Health Plan Administrators and Medical Benefits Managers population. Denominator is the sample size; measure-eligible population is 32,530. Rate was validated by the state's EQRO.
TX:	Medicaid rate includes FFS and managed care populations (34 MCOs). Rate was derived using both administrative and hybrid method data. The rates for the FFS population and six MCOs were calculated using the administrative method. Twenty-eight MCOs used the hybrid method. Denominator is the measure-eligible population. Rate was validated by the state's EQRO.
TX:	CHIP rate includes managed care population (17 MCOs). Denominator is the sample size; measure-eligible population is 102,638. Rate was validated by the state's EQRO.
UT:	Medicaid rate includes managed care population (4 MCOs), representing 85 percent of the population. Rate excludes FFS population, representing 15 percent of the population. Rate was derived using both administrative and hybrid method data. Two MCOs used the administrative method and two MCOs used

Table AWC-CH (continued)

	the hybrid method. Denominator is the measure-eligible population. MCO rates were audited by certified HEDIS auditors.
UT:	CHIP rate includes managed care population (2 MCOs). Rate was derived using both administrative and hybrid method data. One MCO used the administrative method and one MCO used the hybrid method. Denominator is the measure-eligible population. MCO rates were audited by certified HEDIS auditors.
VT:	Rate includes statewide 1115 waiver population enrolled in a public non-risk prepaid inpatient health plan population, representing the total Medicaid population. Rate was validated by the state's EQRO.
VA:	Rate includes managed care population (6 MCOs). State obtained rate from the NCQA Quality Compass and denominator is not available.
WA:	Rate includes managed care population (5 MCOs), representing 97 percent of the population. Rate excludes FFS and PCCM populations, representing 3 percent of the population. Rate also excludes managed care populations who met the continuous eligibility requirement for Medicaid or CHIP but who were not enrolled in a single plan during the continuous enrollment period. Denominator is the sample size; measure-eligible population is 262,019. Rate was audited by the state's EQRO.
WV:	Medicaid rate includes FFS and managed care populations (4 MCOs). Rate includes paid claims only.
WV:	CHIP rate includes FFS population.
WI:	Rate includes managed care population (18 MCOs), representing 80 percent of the population. Rate excludes FFS population, representing 20 percent of the population. Rate was derived using administrative and hybrid method data. Fourteen MCOs used the administrative method and four MCOs used the hybrid method. Measure-eligible population is not available.
WY:	Rate includes FFS population.