

2023 CCO Incentive Measures and Benchmarks

Updated 18 November 2022

| # | Measure | NQF Number | Measure Description | Benchmarks and Improvement Targets | Data Source* |
|---|---|------------|--|--|-------------------------------------|
| 1 | Childhood Immunization Status (Combo 3) | 0038 | Percentage of children that turned 2 years old during the measurement year and had the Dtap, IPV, MMR, HiB, HepB, VZV, and PCV vaccines by their second birthday. | Benchmark: MY 2020 National Medicaid median, 67.9% IT: MN method with 1 percentage point floor | Claims/ Immunization Registry |
| 2 | Immunizations for Adolescents (Combo 2)^ | 1407 | Percentage of adolescents that turned 13 years old during the measurement year and had the meningococcal, Tdap, and HPV vaccines by their 13th birthday. | Benchmark: MY 2019 National Medicaid median, 36.9% IT: MN method with 1 percentage point floor | Claims/ Immunization Registry |
| 3 | Child and Adolescent Well-Care Visits (incentivized for children ages 3-6, kindergarten readiness)^ | 1516 | Percentage of children ages 3 to 6 that had one or more well-child visits with a PCP during the measurement year. | Benchmark: MY 2019 CCO average, 68.6% IT: MN method with 1 percentage point floor | Claims/Clinical Data |
| 4 | Prenatal & Postpartum Care - Postpartum Care^ | 1517 | Percentage of deliveries of live births between October 8 of the year prior to the measurement year and October 7 of the measurement year that had a postpartum visit on or between 7 and 84 days after delivery. | Benchmark: MY 2021 National Medicaid 90th percentile, 84.2% IT: MN method with 3 percentage point floor | Claims/Clinical Data |
| 5 | Screening for Depression and Follow-Up Plan | 0418 | Percentage of patients aged 12 years and older screened for depression on the date of the encounter or up to 14 days prior to the date of the encounter using an age-appropriate standardized depression screening tool AND if positive, a follow-up plan is documented on the date of the eligible encounter. | Benchmark: MY 2021 CCO 90th percentile, 61.0% IT: MN method with 1 percentage point floor | Claims/Clinical Data (eCQM measure) |
| 6 | Health Aspects of Kindergarten Readiness: CCO System-Level Social-Emotional Health | N/A | The aim of this measure is that children from birth to age 5, and their families, have equitable access to services that support their social-emotional health and are the best match for their needs. The measure has four components: 1) Social-Emotional Health Reach Metric Data Review and Assessment 2) Asset Map of Existing Social-Emotional Health Services and Resources 3) CCO-Led Cross-Sector Community Engagement 4) Action Plan to Improve Social-Emotional Health Service Capacity and Access. | CCOs are required to attest to all required components for MY 2 (2023) for the following components, including submissions of the following by timeline set by OHA (a) attestation survey, (b) asset map, (c) action plan: 1) Social-Emotional Health Reach Metric Data Review and Assessment 2) Asset Map of Existing Social-Emotional Health Services and Resources 3) CCO-Led Cross Sector Community Engagement 4) Action Plan to Improve Social-Emotional Health Service Capacity and Access | Plans Reporting |
| 7 | Cigarette Smoking Prevalence | NA | Percentage of Medicaid members (ages 13 and older) who currently smoke cigarettes | Benchmark: MY 2021 CCO median, 22.9% IT: MN method with 1 percentage point floor | Clinical Data |

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| 8 | Alcohol and Drug Misuse: Screening, Brief Intervention and Referral for Treatment (SBIRT) | NA | Percentage of patients ages 12 years and older who received an age-appropriate screening and, of those with a positive full screen, percentage who received a brief intervention or referral to treatment. | <p>~Both components must be met to achieve measure~</p> <p><u>Rate 1 (Screening)</u> Benchmark: MY CCO 2021 75th percentile, 66.6%</p> <p>IT: MN method with a 1 percentage point floor</p> <p><u>Rate 2 (Brief Intervention)</u> Benchmark: MY CCO 2021 75th percentile, 28.7%</p> <p>IT: MN method with a 1 percentage point floor</p> | Clinical Data |
| 9 | Members Receiving Preventive Dental or Oral Health Services, ages 1-5 (kindergarten readiness) and 6-14^ | NA | Percentage of enrolled children ages 1-5 (kindergarten readiness) and 6-14 who received a preventive dental or oral health service during the measurement year | <p>~Both components must be met to achieve measure~</p> <p><u>Ages 1-5</u> Benchmark: MY 2021 CCO average, 47.2%</p> <p>IT: MN method with 1 percentage point floor</p> <p><u>Ages 6-14</u> Benchmark: MY 2021 CCO average, 54.8%</p> <p>IT: MN method with 1 percentage point floor</p> | Claims |
| 10 | Oral Evaluation for Adults with Diabetes | NA | Percentage of adults with diabetes who received at least one oral evaluation within the reporting year. | <p>Benchmark: MY 2021 CCO 90th percentile, 26.4%</p> <p>IT: MN method with 1 percentage point floor</p> | Claims |
| 11 | Mental and Physical Health and Oral Health Assessment Within 60 Days for Children in ODHS Custody | NA | Percentage of children ages 0-17 who received a physical health assessment, children ages 1-17 who received a dental health assessment, and children ages 4-17 who received a mental health assessment within 60 days of the state notifying CCOs that the children were placed into custody with the Department of Human Services (foster care). | <p>Benchmark: Committee consensus, 90%</p> <p>IT: MN method with 2 percentage point floor</p> | Claims/Social Service Data |
| 12 | Comprehensive Diabetes Care: Hemoglobin A1c (HbA1c) Poor Control (>9.0%) | 0059 | Percentage of patients 18-75 years of age with diabetes who had hemoglobin A1c > 9.0% during the measurement period. | <p>Benchmark: MY 2021 National Commercial 75th percentile, 24.8%</p> <p>IT: MN method with 1 percentage point floor</p> | Claims/Clinical Data (eCQM measure) |

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| 13 | Initiation and Engagement of Substance Use Disorder Treatment | 0004 | Initiation and Engagement of Substance Use Disorder Treatment. | <p>~Both components must be met to achieve measure~</p> <p><u>Initiation</u> Benchmark: MY 2021 CCO 90th percentile, 43.3%</p> <p>IT: MN method with 1 percentage point floor</p> <p><u>Engagement</u> Benchmark: MY 2021 CCO 90th percentile, 16.3%</p> <p>IT: MN method with 1 percentage point floor</p> | Claims |
| 14 | Health Equity Measure: Meaningful Language Access to Health Care Services for persons with limited English proficiency | NA | The proportion of visits with spoken and sign language interpreter needs that were provided with OHA qualified or certified interpreter services. | <p>~Must meet both components to achieve measure~</p> <p><u>Comp. 1 (self-assessment)</u> 77 points</p> <p><u>Comp. 2 (Continue hybrid sample)</u> Benchmark: Committee consensus, 75.0%</p> <p>IT: MN method with no floor</p> | Plan Reporting |
| 15 | Social Determinants of Health: Social Needs Screening & Referral | NA | To build system capacity, this measure requires CCOs to (1) prepare for equitable, trauma-informed, and culturally responsive screening and referrals, (2) work with community-based organizations to build capacity for referrals and meeting social needs, and (3) support data sharing between CCOs, providers, and community-based organizations. Later, CCOs start reporting social needs screening and referral data. | <p>Component 1: Must attest to completion of all recommended MY 1 must-pass elements outlined in the measure specifications</p> <p>Component 2: Hybrid measure, Year 1 N/A</p> | Attestation and Plan Reporting |

MY = Measurement Year

* (Data Source*) Clinical data includes electronic health records, registry data, and paper medical records. Claims/clinical data includes measures that require claims and clinical data, and measures that require claims or claims and clinical data. Electronic clinical quality measures (eCQMs) are indicated using italic font.

^ These measures were selected for the 2023 Challenge Pool.

Version Control

This document was updated on 18 November 2022 to list benchmark and improvement targets as decided by the Metrics & Scoring Committee at its November 2022 meeting.