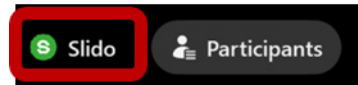# Child and Adults Core Sets Annual Review Workgroup

2027 Annual Review Orientation Meeting
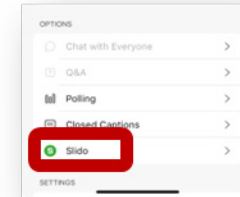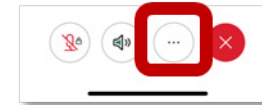
August 21, 2024

Technical Instructions

- **If you are experiencing technical issues during the webinar, please send a message through the Slido Q&A function. To access the Q&A, click the Slido panel in the lower right corner of your screen.**

On the mobile app:

- **If you are having issues speaking during Workgroup or public comments, ensure you are not also muted on your headset or phone. Connecting to audio using the "call me" feature in WebEx is the most reliable option.**

  – **Audio settings can be accessed by selecting the arrow next to the unmute button.**

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Technical Instructions *(continued)*

- During the webinar, there will be opportunities for Workgroup member comments or public comment.

- To make a comment, please use the **raise hand** feature. A hand icon will appear next to your name in the participant panel.

- You will hear a tone when you have been unmuted. Please wait for your cue to speak and lower your hand when you have finished speaking.

- Please note that the chat function is disabled for this webinar. All questions should be submitted using the **Q&A** function, located within the **Slido** panel.

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Welcome, Introductions and Workgroup Objectives

Meeting Objectives

- **Introduce the 2027 Child and Adult Core Sets Annual Review Workgroup.**
  - This year's review will focus on updates to the <u>2027</u> Child and Adult Core Sets.
  - CMS is reviewing the recommendations of the 2026 Workgroup and aims to release the 2026 Core Sets in the coming months.

- **Describe the charge, timeline, and vision for the 2027 Child and Adult Core Sets Annual Review.**

- **Present the process for suggesting measures for addition to or removal from the 2027 Child and Adult Core Sets.**

- **Provide opportunity for questions.**

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Mathematica Core Sets Review Team

- **Patricia Rowan, Principal Researcher**

- **Chrissy Fiorentini, Researcher**

- **Caitlyn Newhard, Managing Consultant**

- **Talia Parker, Health Analyst**

- **Deb Haimowitz, Health Associate**

- **Maria Dobinick, Researcher**

- **Alli Steiner, Senior Researcher**

- **David Clayman, Clinical Advisor**

- **Sreyashi Ghosh, Health Analyst**

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2027 Core Sets Annual Review Workgroup

Voting Members	
Co-Chair: Kim Elliott, PhD, MA, CPHQ, CHCA	Health Services Advisory Group
Co-Chair: Rachel La Croix, PhD, PMP *Nominated by the National Association of Medicaid Directors*	Florida Agency for Health Care Administration
Benjamin Anderson, JD	Families USA
Richard Antonelli, MD, MS	Boston Children's Hospital
*Palav Babaria, MD, MHS	California Department of Health Care Services
Stacey Bartell, MD *Nominated by the American Academy of Family Physicians*	American Academy of Family Physicians
*Laura Boutwell, DVM, MPH *Nominated by the National Association of Medicaid Directors*	Virginia Department of Medical Assistance Services
*Matt Brannon, MBA *Nominated by the National Association of Medicaid Directors*	West Virginia Bureau for Medical Services
Tricia Brooks, MBA	Georgetown University Center for Children and Families
Emily Brown	Attane Health
Joy Burkhard, MBA	Policy Center for Maternal Mental Health
*Joanne Bush, MFSC *Nominated by the National Association of Medicaid Directors*	Iowa Department of Human Services
Stacey Carpenter, PsyD, IMH-E®	ZERO TO THREE
Roshanda Clemons, MD *Nominated by the Medicaid Medical Directors Network*	Nevada Department of Health and Human Services
Lindsay Cogan, PhD, MS	New York State Department of Health

*New Workgroup member.

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2027 Core Sets Annual Review Workgroup *(continued 1)*

Voting Members	
Erica David-Park, MD, MBA, FAAPMR	AmeriHealth Caritas
Anne Edwards, MD *Nominated by American Academy of Pediatrics*	American Academy of Pediatrics
Clara Filice, MD, MPH, MHS *Nominated by the Medicaid Medical Directors Network*	MassHealth
Angela Filzen, DDS *Nominated by the American Dental Association*	G.A. Carmichael Family Health Center
Sara Hackbart, MS *Nominated by the National MLTSS Health Plan Association*	Elevance Health
Richard Holaday, MHA *Nominated by the National Association of Medicaid Directors*	Delaware Division of Medicaid and Medical Assistance
Jeff Huebner, MD, FAAFP *Nominated by the National Association of Medicaid Directors*	Wisconsin Department of Health Services
Sarah Johnson, MD, MPH	Self-employed
David Kelley, MD, MPA	Pennsylvania Department of Human Services
David Kroll, MD *Nominated by the American Psychiatric Association*	Department of Psychiatry, Mass General Brigham Health, Harvard Medical School
Jakenna Lebsock, MPA	Arizona Health Care Cost Containment System (AHCCCS)
Hannah Lee-Brown, PharmD, RPh, CPHQ *Nominated by the Academy of Managed Care Pharmacy*	Novo Nordisk
Katherine Leyba *Nominated by the National Association of Medicaid Directors*	New Mexico Human Services Department

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2027 Core Sets Annual Review Workgroup *(continued 2)*

Voting Members	
*Chimene Liburd, MD, MBA, FACP, CPE, CPC *Nominated by the Medicaid Medical Directors Network*	The District of Columbia Health Care Finance Agency
Lisa Patton, PhD	CVP
*Angela Parker, RHIT *Nominated by the National Association of Medicaid Directors*	Kentucky Department of Medicaid Services
Laura Pennington, MHL *Nominated by the Medicaid Medical Directors Network*	Washington Health Care Authority
Grant Rich, PhD, MA	Alaska Department of Health
Lisa Satterfield, MS, MPH, CAE, CPH *Nominated by the American College of Obstetricians and Gynecologists*	American College of Obstetricians and Gynecologists
Bonnie Silva *Nominated by ADvancing States*	Colorado Department of Health Care Policy & Financing
Kai Tao, ND, MPH, FACNM *Nominated by the American College of Nurse Midwives*	Illinois Contraceptive Access Now of AllianceChicago and Erie Family Health Center
*Sara Tomlinson, DDS, RDH *Nominated by the American Dental Association*	North Carolina Department of Health and Human Services
Ann Zerr, MD	Indiana Family and Social Services Administration
Bonnie Zima, MD, MPH *Nominated by the American Academy of Child and Adolescent Psychiatry and American Psychiatric Association*	UCLA Mental Health Informatics & Data Science (MINDS) Hub

*New Workgroup member.

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2027 Core Sets Annual Review Workgroup: Federal Liaisons

Federal Liaisons (Non-voting)
Agency for Healthcare Research and Quality
Center for Clinical Standards and Quality at CMS
Centers for Disease Control and Prevention
Health Resources and Services Administration
Indian Health Service
Office of the Assistant Secretary for Planning and Evaluation
Office of Disease Prevention and Health Promotion
Substance Abuse and Mental Health Services Administration
US Department of Veteran Affairs

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Disclosure of Interest

- **All Workgroup members are required to submit a Disclosure of Interest form.**

  – **Mathematica requires that Workgroup participants disclose any interests, relationships, or circumstances over the past 4 years that could give rise to a potential conflict of interest or the appearance of a conflict of interest related to the current Child and Adult Core Sets measures or measures reviewed during the Workgroup process.**

- **Workgroup members will review and update their Disclosure of Interest form before the voting meeting.**

- **Members deemed to have an interest in a measure recommended for consideration will be recused from voting on that measure.**

- **During the voting meeting, members will be asked to disclose any interests, though such disclosure may not indicate that a conflict exists.**
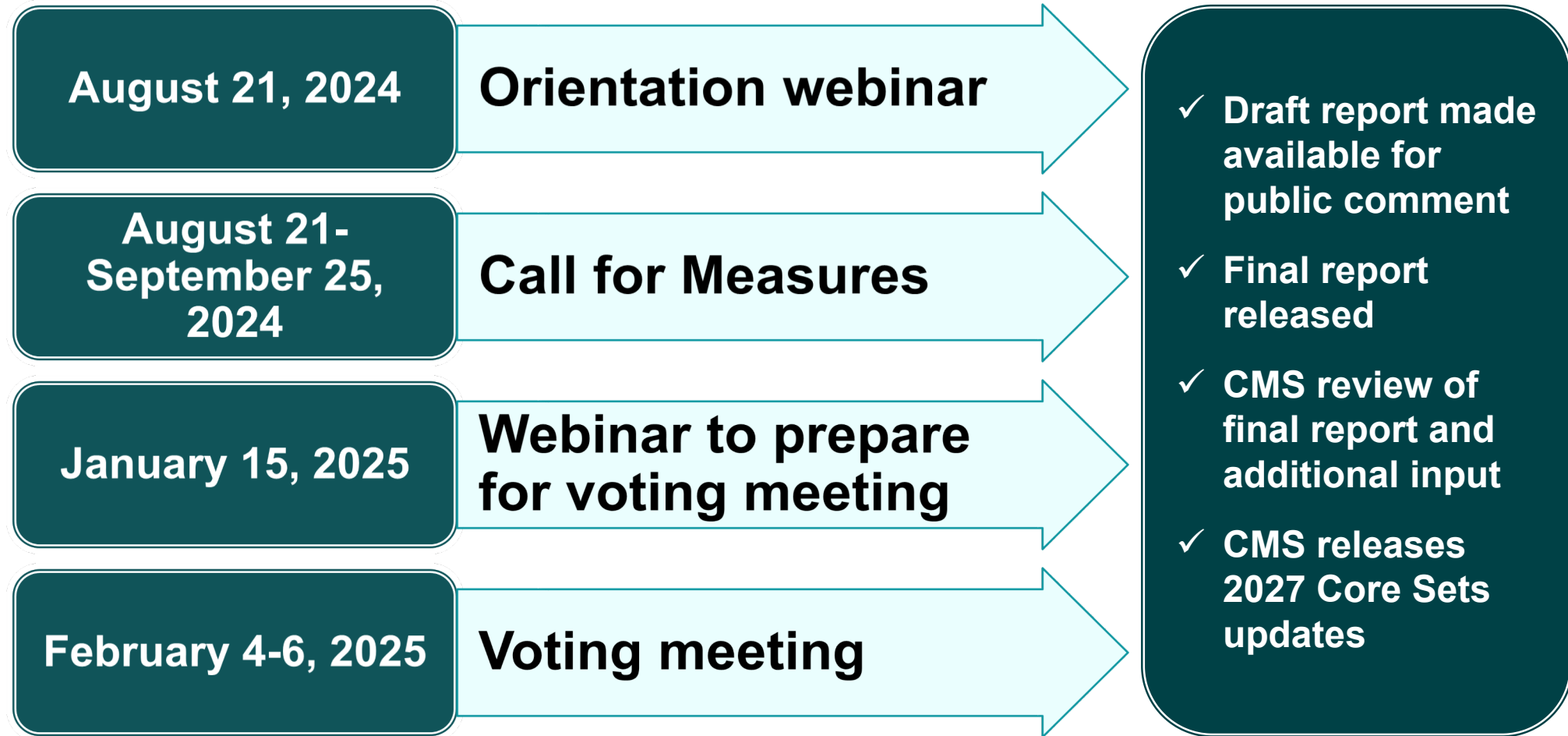
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2027 Core Sets Annual Review Workgroup Charge

The 2027 Child and Adult Core Sets Annual Review Workgroup is charged with assessing the existing Core Sets and recommending measures for removal or addition to strengthen and improve the Core Sets for Medicaid and CHIP.

The Workgroup should recommend measures that are actionable, feasible, and appropriate for state-level reporting, to ensure the measures can meaningfully drive improvement in health care delivery and outcomes in Medicaid and CHIP.

With the mandatory reporting requirements beginning this year with the 2024 Core Sets, the Workgroup should focus, in particular, on the feasibility of state reporting by all states for all Medicaid and CHIP populations as well as opportunities for advancing health equity through stratification of measures on the Core Sets.

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2027 Core Sets Annual Review Workgroup Milestones

August 21, 2024 → **Orientation webinar**

August 21-September 25, 2024 → **Call for Measures**

January 15, 2025 → **Webinar to prepare for voting meeting**

February 4-6, 2025 → **Voting meeting**

- ✓ Draft report made available for public comment
- ✓ Final report released
- ✓ CMS review of final report and additional input
- ✓ CMS releases 2027 Core Sets updates

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Additional Input During the 2027 Core Sets Annual Review Process

- **CMS will obtain additional input on the Workgroup recommendations through two processes.**

  - State outreach with CMS's Quality Technical Advisory Group (QTAG), comprised of state Medicaid and CHIP quality leaders, about the feasibility of recommended measures for state-level reporting.

  - Outreach within CMS and with key federal partners about alignment and priority of recommended measures.

- **More information about the Medicaid and CHIP Child and Adult Core Sets Annual Review and Selection Process is available at https://www.medicaid.gov/medicaid/quality-of-care/downloads/annual-core-set-review.pdf.**

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Vision for the 2027 Child and Adult Core Sets Annual Review

CMS Goals for the Core Sets

- **Assist states in reporting the Core Sets according to mandatory reporting requirements through technical assistance and outreach to states.**

- **Streamline data collection and reporting processes to reduce burden on states.**

- **Monitor state and national performance on Core Set measures.**

- **Support states to mobilize Core Set data to drive improvements in health care quality and health outcomes.**

- **Increase the stratification of Core Set measures to advance health equity.**

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Mandatory Core Set Reporting

- **Beginning with the 2024 Core Sets, reporting of all the Child Core Set measures and the behavioral health measures on the Adult Core Set will be required for all states.**

  – State reporting of data for the 2024 Core Sets starts in September 2024 and will close on December 31, 2024.

- **Feasibility and viability of state-level reporting of current and future Core Set measures are key considerations for mandatory reporting.**

- **Another key consideration is the ability to stratify measures by factors such as race, ethnicity, sex, and geography.**

  – Beginning with 2025 Core Sets reporting, states will be expected to stratify a subset of mandatory measures. Stratification will be required for all eligible mandatory measures beginning with 2028 Core Sets reporting.

- **Workgroup recommendations for the 2027 Core Sets should consider the feasibility for <u>all</u> states to report a measure for <u>all</u> Medicaid and CHIP populations within two years of the measure being added to the Core Sets.**

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Role of the Workgroup in Strengthening the 2027 Child and Adult Core Sets

- **The annual Workgroup process is designed to identify gaps in the existing Core Sets and suggest updates to strengthen and improve the Core Sets.**

- **The Workgroup discussion must first determine whether a measure is feasible and then balance the desirability and viability of measures from the perspective of state-level quality measurement and improvement.**

  - **Keep in mind mandatory reporting requirements: Quality measures must be feasible for states to report in order to be included on the Core Sets.**

CMCS Remarks

Deirdra Stockmann, Director
Division of Quality and Health Outcomes
Center for Medicaid and CHIP Services

Background on the Child and Adult Core Sets

Changes to the 2025 Child and Adult Core Sets

- In May 2024, CMCS released the 2025 measure lists, based on the input received through the 2025 annual review process.

- Four provisional new measures will be added for voluntary reporting in 2025 (three are on the Child Core Set and one on the Adult Core Set). These provisional measures are not considered part of the 2025 Child or Adult Core Sets. CMS expects to add these provisional measures to the Core Sets for mandatory reporting in 2026.

- Other changes for 2025 include:
  - Child Core Set: one measure will be retired from the 2025 Child Core Set, Ambulatory Care: Emergency Department Visits (AMB-CH).
  - Adult Core Set: four non-behavioral health measures will be added to, and no measures will be removed from, the 2025 Adult Core Set.

- More information about the 2025 updates is available at: https://www.medicaid.gov/federal-policy-guidance/downloads/sho24001.pdf.

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Potential Changes to the 2026 Child and Adult Core Sets and Beyond: Recap of the 2026 Annual Review

- **The Workgroup recommended one measure for addition and one measure for removal from the 2026 Core Sets.**
  - ADDITION: Prenatal Depression Screening and Follow-Up
  - REMOVAL: Use of Opioids at High Dosage in Persons Without Cancer (OHD-AD)

- **NCQA announced that two measures currently on the Child and Adult Core Sets are being retired:**
  - Antidepressant Medication Management (AMM-AD) will be retired for HEDIS MY 2025 (2026 Adult Core Set)
  - Medical Assistance with Smoking and Tobacco-Related Cessation (MSC-AD)
    - A new measure will expand to adolescents and will leverage electronic clinical data to incorporate prevention, screening, and receipt of evidence-based cessation interventions. NCQA plans to retire the MSC measure when the replacement measure is ready, which is planned for HEDIS Measurement Year 2026 (2027 Adult Core Set).
      Source: https://www.ncqa.org/blog/retiring-and-replacing-hedis-measures-2024-2026/

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Preparing for the Public Call for Measures for the 2027 Child and Adult Core Sets

Call for Measures: 2027 Child and Adult Core Sets Annual Review

- **To focus the Call for Measures for the 2027 Child and Adult Core Sets Annual Review on measures that are a good fit for the Core Sets, Mathematica has defined the criteria for addition and removal in three areas.**

- **To be considered for addition to the 2027 Core Sets, <u>all measures</u> must meet minimum technical feasibility and appropriateness requirements.**

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Criteria for Suggesting Measures for Addition

- **All minimum technical feasibility and appropriateness criteria <u>must</u> be met for a measure to be considered by the Workgroup during the voting meeting in February.**

Minimum Technical Feasibility and Appropriateness
A1. The measure must be fully developed and have detailed technical specifications that enable production of the measure at the state level (e.g., numerator, denominator, and value sets). (Specifications must be provided as part of the submission.)
A2. The measure must have been tested in state Medicaid and/or CHIP programs or be in use by one or more state Medicaid and/or CHIP programs according to measure specifications. (Documentation is required as part of the submission.)
A3. An available data source or validated survey instrument exists that contains all the data elements necessary to calculate the measure, including an identifier for Medicaid and CHIP beneficiaries (or the ability to link to an identifier). (Evidence about the reliability and validity of measures is required as part of the submission or explain why such information is not available.)
A4. The specifications and data source must allow for consistent calculations across states (e.g., coding and data completeness). (Documentation of data quality and consistency across states is required as part of the submission.)
A5.* The measure aligns with current clinical guidance and/or positive health outcomes.
A6. The measure must include technical specifications (including code sets) that are provided free of charge for state use in the Core Sets.

* Criterion is new for the 2027 Child and Adult Core Set review cycle.

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Criteria for Suggesting Measures for Addition *(continued)*

Actionability and Strategic Priority

B1. The measure addresses a strategic priority for improving health care delivery and outcomes in Medicaid and CHIP (e.g., it addresses the most pressing needs of Medicaid and CHIP beneficiaries).

B2. The measure is able to be stratified by the required stratification categories included in the May 2024 State Health Official Letter: race, ethnicity, sex, and geography for the Medicaid and CHIP population. Considerations could include adequate sample and population sizes and available data in the required data source(s).

B3. The measure can be used to assess state progress in improving health care delivery and outcomes in Medicaid and CHIP (e.g., the measure has room for improvement, performance is trendable, and improvement can be directly influenced by Medicaid and CHIP programs/providers).

B4.* The measure would fill a gap in the Core Sets or would add value to the existing measures in the Core Sets. (If this measure is being suggested as a replacement of an existing measure, a removal form must be submitted for the existing measure.)

Other Considerations

C1. The prevalence of the condition or outcome being measured is sufficient to produce reliable and meaningful state-level results, taking into account Medicaid and CHIP population sizes and demographics.

C2. The measure and measure specifications are aligned with those used in other CMS programs, where possible (e.g., Core Quality Measures Collaborative Core Sets, Medicare Promoting Interoperability Program, Merit-Based Incentive Payment System, Medicaid and CHIP Quality Rating System, Medicare Advantage Star Ratings, and/or Medicare Shared Savings Program).

C3.* Adding the measure to the Core Sets does not result in substantial additional data collection burden for providers or Medicaid and CHIP beneficiaries.

C4. All states should be able to produce the measure for all Medicaid and CHIP populations within two years of the measure being added to the Core Sets.

C5.* The code sets and codes specified in the measure must be in use by Medicaid and CHIP programs or otherwise be readily available to Medicaid and CHIP programs to support calculation of the measure.

* Criterion is new for the 2027 Child and Adult Core Set review cycle.

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Criteria for Suggesting Measures for Removal

Technical Feasibility

A1. The measure is being retired by the measure steward and will no longer be updated or maintained.

A2. The measure is not fully developed and does not have detailed technical measure specifications, preventing production of the measure at the state level (e.g., numerator, denominator, and value sets).

A3. The majority of states report significant challenges in accessing an available data source that contains all the data elements necessary to calculate the measure, including an identifier for Medicaid and CHIP beneficiaries (or the ability to link to an identifier).

A4. The specifications and data source do not allow for consistent calculations across states (e.g., there is documented variation in coding or data completeness across states).

Actionability and Strategic Priority

B1. The measure is no longer aligned with strategic priorities for improving health care delivery and outcomes in Medicaid and CHIP (e.g., strategic priorities have shifted and this measure does not address the most pressing needs of Medicaid and CHIP beneficiaries).

B2. The measure cannot be used for comparative analyses of disparities among Medicaid and CHIP beneficiaries by all the required stratification categories included in the May 2024 State Health Official letter: race, ethnicity, sex, and geography. Considerations could include lack of adequate sample and population sizes or lack of available data in the required data source(s).

B3. Measure performance for all populations is so high and unvarying that meaningful distinctions in improvements or performance can no longer be made.

B4. Improvement on the measure is outside the direct influence of Medicaid and CHIP programs/providers.

B5.* The measure no longer aligns with current clinical guidance and/or positive health outcomes.

B6.* Another measure is recommended for replacement which is: (1) more broadly applicable (across settings, populations, or conditions) for the topic, and/or (2) more proximal in time to desired beneficiary outcomes, and/or (3) more strongly associated with desired beneficiary outcomes. (Note that the replacement measure must also meet the minimum technical feasibility criteria to be considered by the Workgroup.)

* Criterion is new for the 2027 Child and Adult Core Set review cycle.

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Criteria for Suggesting Measures for Removal *(continued)*

Other Considerations
C1. The prevalence of the condition or outcome being measured is not sufficient to produce reliable and meaningful state-level results, taking into account Medicaid and CHIP population sizes and demographics.
C2. The measure and measure specifications are not aligned with those used in other CMS programs (e.g., Core Quality Measures Collaborative Core Sets, Medicare Promoting Interoperability Program, Merit-Based Incentive Payment System, Medicaid and CHIP Quality Rating System, Medicare Advantage Star Ratings, and/or Medicare Shared Savings Program).
C3.* Including the measure in the Core Sets results in substantial additional data collection burden for providers or Medicaid and CHIP beneficiaries.
C4. All states may not be able to produce the measure for all Medicaid and CHIP populations within two years of the measure being added to the Core Sets.

* Criterion is new for the 2027 Child and Adult Core Set review cycle.

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Identifying Measure Gaps in the Child and Adult Core Sets

- **The 2026 Workgroup identified the following high-priority gap areas in the Core Sets:**

  - **Health equity and social drivers of health**

  - **Maternal and perinatal health**

  - **Patient-reported outcomes and experiences of care**

  - **Behavioral health care**

- **The full list of gap areas identified by the 2026 Workgroup is available in the Call for Measures Materials packet on our website: https://www.mathematica.org/features/maccoresetreview.**

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Home and Community-Based Services Quality Measure Set

- **Measuring and Improving Quality in Home and Community-Based Services (HCBS):**

  – CMS recently released updates to the **HCBS Quality Measure Set**.

  – **Money Follows the Person grant recipients** are required to report on a subset of measures in the HCBS Quality Measure Set beginning in 2026.

  – The Ensuring Access to Medicaid Services **final rule** (Access rule) requires all states to report on the HCBS Quality Measure Set beginning in 2028.

- **CMS launched a new HCBS Quality Measure Set Review Workgroup to update and maintain the HCBS Quality Measure Set.**

- **More information on the HCBS Quality Measure Set and review process is available at: https://mathematica.org/features/hcbsqmsreview.**

# Process for Suggesting Measures for Addition or Removal

Suggesting Measures for Addition or Removal

- For the 2027 review cycle Workgroup members, federal liaisons, and members of the public are invited to suggest measures to add to or remove from the Child and Adult Core Sets.

- Use the links below to suggest a measure for addition or removal.
  - Form to Suggest a Measure for Addition: https://mathematica.questionprogov.com/t/AC5TZGpO.
  - Form to Suggest a Measure for Removal: https://mathematica.questionprogov.com/t/AC5TZGpL.

- All measure submission forms must be submitted by 8 PM ET on Wednesday, September 25, 2024.

- The submission forms and additional resources are also available at: https://www.mathematica.org/features/maccoresetreview.

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Call for Measures Resources

- **The 2027 Resources tab on the website contains helpful documents including: Call for Measures Materials packet, Measure Submission Tips & FAQs, background resources on the Child and Adult Core Sets, and Word previews of the measure submission forms.**

2027 Measure Submission Form: Measure(s) Suggested for Addition to the Child and/or Adult Core Sets

Instructions

1. **Only measures that meet the minimum technical feasibility and appropriateness criteria for addition to the 2027 Child and Adult Core Sets will be considered.** The criteria are available in the Call for Measures Materials packet posted on https://mathematica.org/features/MACCoreSetReview.

2. A response is required for all questions that have an asterisk symbol *.

3. All questions that have a blank text box underneath the question will accept free text responses, with character limits. Please spell out all abbreviations and define special terms at their first occurrence.

4. For questions with defined response options, note whether the question is "select one" or "select all that apply." Please click on your desired response option to select it. For "select all that apply" questions, you can click on the checkbox to remove your selection. To change your response to a "select one" question, click on a different response option.

5. Please include links to supporting documentation where relevant. If links are not available, you may also submit supporting documentation as an attachment at the end of the form or via email to MACCoreSetReview@mathematica-mpr.com. If submitting an attachment, the file name should indicate the related question number in the form.

6. Send any questions to MACCoreSetReview@mathematica-mpr.com with the subject line "Public Call for Measures."

Start   Save & Continue Later

General Measure Submission Tips

- **Measure submission forms are the foundation for the Measure Information Sheets that Workgroup members review to prepare for the voting meeting.**
  - Provide evidence to support your measure suggestion, including citations where applicable.
  - If the measure has been discussed by the Workgroup previously, consider why the measure was not recommended for addition/removal and include information that justifies discussing the measure again.
  - For measures suggested for addition, be sure to address the minimum technical feasibility and appropriateness criteria.

- **When suggesting a new measure to replace a current Core Set measure, remember to submit both an addition form and a removal form.**

- **Use the Word previews of the measure submission forms (available in the 2027 Resources section of the Child and Adult Core Sets Review website) to ensure that you have all the required information.**

- **Include additional information as an attachment to your measure submission form.**

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Measure Submission FAQ

- **Will all measures submitted be considered by the Workgroup during the voting meeting?**
  - <u>No</u>. Mathematica will review all measure submission forms and determine which measures meet the criteria for discussion.
  - One reason why a measure might not be discussed is if the submission form is incomplete or questions in the form are not adequately addressed.
  - Another reason is if the measure has been previously discussed and the submitter did not provide strong justification and new evidence explaining why the Workgroup should reconsider the measure.
  - Measures suggested for addition must also meet <u>all minimum technical feasibility and appropriateness criteria</u> to be considered by the Workgroup. During past reviews, the most common reason why a measure suggested for addition has not been considered has been that it had not been tested in Medicaid or CHIP and was not in currently in use by states.

- **What are examples of "strong justification and new evidence" that would justify the Workgroup reconsidering a measure that has been discussed in the past?**
  - A substantive change to the measure's technical specifications (e.g., a change to the data collection method or required code sets) that impacts the feasibility of state-level reporting.
  - Evidence that the measure has been widely adopted by states since the last time it was considered.
  - A change in the relevant clinical guidelines, population health conditions, and/or CMS's strategic priorities.

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Measure Submission FAQ (*continued*)

- ## What do you mean by "testing in state Medicaid and/or CHIP programs"?

  - To meet minimum technical feasibility and appropriateness requirements, measures must have been field tested in or be currently in use by state Medicaid and CHIP programs.

  - Field testing—or beta testing—occurs after the development of complete specifications and is designed to test implementation and usability in the target population (in this case, state Medicaid and CHIP programs).

- ## What qualifies as "state use" of a measure?

  - The measure must be in current use, *according to technical specifications*, by at least one state Medicaid or CHIP program.

  - If a state has adapted an existing quality measure this does NOT qualify as state use of the measure.

- ## Will I need to complete the form in one session or is there an option to save my work and continue later?

  - Both forms include an option to save your work and continue later.

  - Note that you must complete all required questions on a given page before you can access the "Save & Continue Later" feature.

See the "Measure Submission Tips & FAQ" document in the 2027 Resources tab of https://www.mathematica.org/features/maccoresetreview *for more questions and answers.*

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Co-Chair Remarks

Kim Elliott
Health Services Advisory Group

Rachel La Croix
Florida Agency for Health Care Administration

Questions?

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Next Steps and Resources

Next Steps

- **Workgroup members, federal liaisons, and members of the public are invited to suggest measures to add to or remove from the Child and Adult Core Sets.**

- **All measures suggested for addition or removal are due on <u>Wednesday, September 25, 2024</u> by <u>8:00 PM ET.</u>**

- **The meeting to prepare for the voting meeting will be held January 15, 2025, 2:00–3:00 PM ET via webinar.**

- **The voting meeting will be held February 4-6, 2025, 11:00–4:00 PM ET via webinar.**

- **Registration information is available at <u>https://www.mathematica.org/features/maccoresetreview</u>.**

For More Information

- **Information on the Child Core Set is available at https://www.medicaid.gov/medicaid/quality-of-care/performance-measurement/child-core-set/index.html.**

- **Information on the Adult Core Set is available at https://www.medicaid.gov/medicaid/quality-of-care/performance-measurement/adult-core-set/index.html.**

- **Information on the Child and Adult Core Sets Annual Review is available at https://www.mathematica.org/features/maccoresetreview.**

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Questions

If you have questions about the 2027 Child and Adult Core Sets Annual Review, please email the Mathematica Core Sets Review Team at: MACCoreSetReview@mathematica-mpr.com.

THANK YOU FOR PARTICIPATING!

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