
Medicaid and CHIP Child and Adult Core Sets Annual Review and Selection Process

The Purpose of the Core Sets:

The Medicaid and Children’s Health Insurance Program (CHIP) Child Core Set and Adult Core Set contain measures intended to serve as a set of measures which, taken together, can be used to estimate the overall national quality of health care for Medicaid and CHIP beneficiaries.^{1,2} The Core Sets are comprised of quality measures collected at the state level. To be publicly reported, measures must be reported by 25 or more states and the data must meet internal quality standards. These state-level data are then used to calculate national estimates. A large subset of these measures are also included in the State Health System Performance pillar of the Medicaid and CHIP Scorecard.³ By statute, reporting of the Core Sets is currently voluntary for states. Beginning in 2024, reporting on the Child Core Set and the behavioral health measures on the Adult Core Set will become mandatory.^{4,5}

The Annual Core Set Review and Selection Process:

The quality measures included on the Core Sets must (1) contribute to estimates of the overall national quality of health care in Medicaid and CHIP; (2) include detailed technical specifications appropriate for reporting at the state level, have been tested in state Medicaid/CHIP programs, and have available data sources that contains all the information necessary to calculate the measure for Medicaid and CHIP beneficiaries; (3) be feasible for at least 25 states to report; (4) include specifications provided free of charge for state use in this program; (5) provide useful and actionable results to drive improvement; and (6) be recommended through the annual Core Set review process.⁶

The annual Core Set review is designed to identify gaps in the existing Core Sets and suggest updates to strengthen and improve the Core Sets. The process includes:

- Public Call for Measures: Beginning with the 2027 Child and Adult Core Sets Annual Review cycle, a Public Call for Measures will be conducted.
- Annual Core Set Review Workgroup:⁷ The workgroup is comprised of Medicaid and CHIP stakeholders and measurement experts who develop a set of recommendations for changes to the Core Sets.

¹ The Child Core Set was established under section SSA 1139A and states began reporting the measures in FFY 2011.

² The Adult Core Set was established under section SSA 1139B and states began voluntarily reporting the measures in FFY 2013.

³ <https://www.medicare.gov/state-overviews/scorecard/state-health-system-performance/index.html>

⁴ Legislation making the Child Core Set mandatory: Bipartisan Budget Act of 2018
<https://www.congress.gov/115/bills/hr/1892/BILLS-115hr1892enr.xml>

⁵ Legislation making the behavioral health measures on the Adult Core Set mandatory: The Substance Use-Disorder Prevention that Promotes Opioid Recovery and Treatment for Patients and Communities Act (SUPPORT for Patients and Communities Act) <https://www.congress.gov/115/bills/hr/6/BILLS-115hr6enr.pdf>

⁶ <https://www.mathematica.org/features/maccoresetreview>

⁷ Information on workgroup meetings, resources, and reports:
<https://www.mathematica.org/features/maccoresetreview>

- Meetings: The Workgroup convenes each year to suggest, discuss, and vote on annual revisions to the measures on the Medicaid and CHIP Child and Adult Core Sets. The meetings are open to the public and meeting transcripts are posted. Notification of upcoming meetings is posted and an email is sent to the Technical Assistance/Analytic Support (TA/AS) mailing list.⁸
- Draft Report: A report summarizing the Workgroup's review process and recommendations is made available in draft format.
- Public Comment: The Draft Report is posted for public comment.
- Final Report: The Final Report summarizes the Workgroup's review process and recommendations. It also includes the public comments submitted on the draft report.
- State Outreach: Medicaid and CHIP are federal-state partnerships. Given the importance of state input and ongoing efforts to reduce reporting burden, the recommendations in the Final Report are discussed with our state partners to obtain their feedback.
- Internal Stakeholder Outreach and Federal Review Process: Given the importance of measure alignment, the recommendations in the Final Report, along with feedback from our state partners, are also discussed internally in CMS and with key Federal partners before updates to the Core Sets are reviewed with Center for Medicaid & CHIP Services (CMCS) leadership.
- The Annual Core Set Update is published in a State Health Official letter (SHO) by December 31st.

⁸ To be added to the TA/AS mailing list email MACQualityTA@cms.hhs.gov.