

2025

# Adult Core Set Qualifiers: Medicaid

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For technical questions regarding use of this application, please reach out to [MDCT\\_help@cms.hhs.gov](mailto:MDCT_help@cms.hhs.gov). For content-related questions, such as about measure specifications or what information to enter into each field, please reach out to [MACQualityTA@cms.hhs.gov](mailto:MACQualityTA@cms.hhs.gov).

### 1. Generally, what are the ages of adults covered in the state's Medicaid program (inclusive of CHIP-funded Medicaid Expansion)(Title XIX & XXI)?

Example: [State]'s Medicaid (Title XIX and XXI) program covers adults ages 19 and older.

### 2. Delivery System

As of December 31, 2024, approximately what percentage of adults in your state's Medicaid program (inclusive of CHIP-funded Medicaid Expansion) (Title XIX & XXI) were enrolled in each delivery system?

	MEDICAID (TITLE XIX & XXI) ADULTS UNDER AGE 65	MEDICAID (TITLE XIX & XXI) AGE 65 AND OLDER
Fee-for-Service	<input type="text"/> %	<input type="text"/> %
PCCM	<input type="text"/> %	<input type="text"/> %
Managed Care	<input type="text"/> %	<input type="text"/> %
<b>Total</b>	<b>0.0 %</b>	<b>0.0 %</b>

MEDICAID (TITLE XIX & XXI)  
ADULTS UNDER AGE 65

MEDICAID (TITLE XIX & XXI)  
AGE 65 AND OLDER

Integrated Care Model (ICM)

%

%

+ Add Another

**Total**

%

%

### 3. Audit or Validation of Measures

Were any of the Core Set measures audited or validated?

Yes, some of the Core Set measures have been audited or validated

Who conducted the audit or validation?

Which measures did they audit or validate?

Search by Measure...



- Select All
- AAB-AD - Avoidance of Antibiotic Treatment for Acute Bronchitis/Bronchiolitis: Age 18 And Older
- AIS-AD - Adult Immunization Status
- AMM-AD - Antidepressant Medication Management
- AMR-AD - Asthma Medication Ratio: Ages 19 to 64
- BCS-AD - Breast Cancer Screening
- CBP-AD - Controlling High Blood Pressure
- CCP-AD - Contraceptive Care - Postpartum Women Ages 21 to 44

- CCS-AD - Cervical Cancer Screening
- CCW-AD - Contraceptive Care - All Women Ages 21 to 44
- CDF-AD - Screening for Depression and Follow-Up Plan: Age 18 and Older
- CHL-AD - Chlamydia Screening in Women Ages 21 to 24
- COB-AD - Concurrent Use of Opioids and Benzodiazepines
- COL-AD - Colorectal Cancer Screening
- CPA-AD - Consumer Assessment of Healthcare Providers and Systems (CAHPS®) Health Plan Survey 5.1H, Adult Version (Medicaid)
- CPU-AD - Long-Term Services and Supports Comprehensive Care Plan and Update
- EDV-AD - Ambulatory Care Sensitive Emergency Department Visits for Non-Traumatic Dental Conditions in Adults
- FUA-AD - Follow-Up After Emergency Department Visit for Substance Use: Age 18 and Older
- FUH-AD - Follow-Up After Hospitalization for Mental Illness: Age 18 and Older
- FUM-AD - Follow-Up After Emergency Department Visit for Mental Illness: Age 18 and Older
- GSD-AD - Glycemic Status Assessment for Patients with Diabetes
- HPCMI-AD - Diabetes Care for People with Serious Mental Illness: Glycemic Status (>9.0%)
- HVL-AD - HIV Viral Load Suppression
- IET-AD - Initiation and Engagement of Substance Use Disorder Treatment
- MSC-AD - Medical Assistance with Smoking and Tobacco Use Cessation
- OEVP-AD - Oral Evaluation During Pregnancy: Ages 21 to 44
- OHD-AD - Use of Opioids at High Dosage in Persons Without Cancer

- OUD-AD - Use of Pharmacotherapy for Opioid Use Disorder
- PCR-AD - Plan All-Cause Readmissions
- PDS-AD - Postpartum Depression Screening and Follow-Up: Age 21 and Older
- PPC2-AD - Prenatal and Postpartum Care: Age 21 and Over
- PQI01-AD - PQI 01: Diabetes Short-Term Complications Admission Rate
- PQI05-AD - PQI 05: Chronic Obstructive Pulmonary Disease (COPD) or Asthma in Older Adults Admission Rate
- PQI08-AD - PQI 08: Heart Failure Admission Rate
- PQI15-AD - PQI 15: Asthma in Younger Adults Admission Rate
- PRS-AD - Prenatal Immunization Status: Age 21 and Older
- SAA-AD - Adherence to Antipsychotic Medications for Individuals With Schizophrenia
- SSD-AD - Diabetes Screening for People with Schizophrenia or Bipolar Disorder Who Are Using Antipsychotic Medications

[+ Add Another](#)

No, none of the Core Set measures have been audited or validated

#### 4. External Contractor

Please indicate whether your state obtained assistance from one or more external contractors in collecting, calculating, and/or reporting Core Set data (optional).

Yes, we did obtain assistance from one or more external contractors in collecting, calculating, and/or reporting Core Set data.

Select all that apply:

- External Quality Review Organization (EQRO)
- MMIS Contractor
- Data Analytics Contractor

Other

Please explain:

No, we calculated all the measures internally.

## Complete all Adult Core Set Questions and Adult Core Set Measures to submit to CMS

Complete all Adult Core Set Questions and Adult Core Set Measures to submit to CMS for review.

[Validate Core Set Questions](#)

[Complete Core Set Questions](#)

## Do you have questions or need support?

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Beginning with FFY 2024 reporting, states are required to report all of the measures on the Child Core Set and the behavioral health measures on the Adult Core Set. States with approved Health Home Programs in operation by June 30, 2023 are required to report all of the measures on the Health Home Core Sets. More information on mandatory reporting requirements is included in the [Initial Core Set Mandatory Reporting Guidance for the Child and Adult Core Sets](#) and [Health Home Core Sets](#).

PRA Disclosure Statement: Centers for Medicare & Medicaid Services (CMS) collects this mandatory information in accordance with (42 U.S.C. 1396a) and (42 CFR 430.12); which sets forth the authority for the submittal and collection of state plans and plan amendment information in a format defined by CMS for the purpose of improving the state application and federal review processes, improve federal program management of Medicaid programs and Children's Health Insurance Program, and to standardize Medicaid program data which covers basic requirements, and individual content that reflects the characteristics of the particular state's program. The information will be used to monitor and analyze performance metrics related to the Medicaid and Children's Health Insurance Program in efforts to boost program integrity efforts, improve performance and accountability across the programs. Under the Privacy Act of 1974 any personally identifying information obtained will be kept private to the extent of the law. According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0938-1188. The time required to complete and review the information collection is estimated to range from 1 hour to 80 hours per response (see below), including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: CMS, 7500 Security Boulevard, Attn: PRA Reports Clearance Office, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850.

MDCT | Quality Measure  
Q M R | Reporting

Medicaid Data Collection Tool



A federal government website managed and paid for by the U.S. Centers for Medicare and Medicaid Services and part of the MACPro suite.

**Medicaid.gov**  
Keeping America Healthy

Email [MDCT\\_Help@cms.hhs.gov](mailto:MDCT_Help@cms.hhs.gov) for help or feedback.

**7500 Security Boulevard Baltimore, MD 21244**