Children With Chronic Conditions (CCC)

## Summary of Changes to HEDIS 2013

* Question numbers have been updated for consistency with the 5.0H version of the child CAHPS survey.
* Deleted obsolete CPT codes 90918–90920, 90922–90924, 99293–99296, 99298–99300, 99431–99433, 99435 from Table CCC-3.

Description

This measure provides information on parents’ experience with their child’s health plan for the population of children with chronic conditions.

Results include the same ratings, composites and individual question summary rates as those reported for the CAHPS Health Plan Survey 5.0H, Child Version. In addition, three CCC composites summarize satisfaction with basic components of care essential for successful treatment, management and support of children with chronic conditions:

1. Access to Specialized Services.
2. Family Centered Care: Personal Doctor Who Knows Child.
3. Coordination of Care for Children With Chronic Conditions.

Item-specific question summary rates are reported for each composite question. Question summary rates are also reported individually for two items summarizing the following concepts:

1. Access to Prescription Medicines.
2. Family Centered Care: Getting Needed Information.

Eligible Population

|  |  |
| --- | --- |
| Product lines | Commercial, Medicaid (report each product line separately). |
| Ages | 17 years and younger as of December 31 of the measurement year. |
| Continuous enrollment | *Commercial:* The measurement year.  *Medicaid:* The last six months of the measurement year. |
| Allowable gap | No more than one gap in enrollment of up to 45 days during the measurement year. To determine continuous enrollment for a Medicaid member for whom enrollment is verified monthly, the member may not have more than a 1-month gap in coverage (a member must be enrolled for 5 of the last 6 months of the measurement year). |
| Current enrollment | Currently enrolled at the time the survey is completed. |

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Protocol and Survey Instrument

|  |  |
| --- | --- |
| Commercial, Medicaid | Collected as part of the CAHPS Health Plan Survey 5.0H, Child Version.  To collect results for the CCC measure, the health plan and survey vendor modify the HEDIS protocols for administering the HEDIS/CAHPS child survey as described in the sections below. |

Protocols for Children With Chronic Conditions

Sample Frame Data File Generation

|  |  |
| --- | --- |
| Prescreen status code | Health plans use transaction data or other administrative databases to assign a prescreen status code to each child member in the CAHPS child survey sample frame data file. The prescreen status code identifies a set of children who are more likely to have a chronic condition.  Health plans search claims and encounters for the measurement year and the year prior to the measurement year and assign codes as follows.  **1** = No claims or encounters during the measurement year or the year prior to the measurement year that meet the criteria listed for prescreen status code 2.  **2** = The member has claims or encounters during the measurement year or year prior to the measurement year that meet one or more of the following criteria.   * At least one encounter in an outpatient, nonacute inpatient, acute inpatient or emergency department setting during the measurement year or the year prior to the measurement year with a diagnosis in Table CCC-1. The diagnosis does not have to be the principal diagnosis. Use the codes in Table CCC-3 to identify the visit type. * At least two encounters in an outpatient setting on different dates of service during the measurement year or the year prior to the measurement year with a diagnosis listed in Table CCC-2. Two visits must have the same diagnosis (for example, one visit for asthma and one visit for conduct disorder do not qualify). The diagnosis does not have to be the principal diagnosis. Use the codes in Table CCC-3 to identify visit type. * At least one encounter in an acute inpatient, nonacute inpatient or emergency department setting during the measurement year or the year prior to the measurement year with a diagnosis listed in Table CCC-2. Use the codes in Table CCC-3 to identify visit type. |

### Table CCC-1: Codes to Assign the Prescreen Status Code

|  |  |
| --- | --- |
| Description | ICD-9-CM Diagnosis |
| Infectious disease | 010-018, 030, 040.2, 042, 046, 079.5, 135, 136.3 |
| Malignancies | 140-209, 230-239 |
| Thyroid disorders | 240-246 |
| Diabetes | 250 |
| Other endocrine disorders | 252, 253, 255 |
| Nutritional deficiencies | 260-263, 268.0-268.1 |
| Metabolic disorders | 270-273, 275, 279 |
| Cystic fibrosis | 277 |
| Blood disorders | 281-284, 286, 288 |
| Psychoses | 290-299 |
| Neuroses, alcohol/drugs, depression, eating disorders | 300-311 |
| Developmental delay (speech, reading, coordination) | 315 |
| Mental retardation | 317-319 |
| Central nervous system diseases, hereditary and degenerative | 330, 331.3-331.4, 331.89, 333.5, 333.7, 334-335 |
| Central nervous system diseases, other | 340-341, 344, 352.6, 356 |
| Cerebral palsy | 343 |
| Epilepsy | 345 |
| Muscular dystrophy | 359 |
| Eye disorders | 365.14, 369 |
| Hearing loss | 389 |
| Other circulatory system disorders | 393-398, 424.1, 424.3, 425, 446.0, 446.2-446.4, 446.6-446.7 |
| Other respiratory diseases | 496, 516 |
| Ulcer | 531-534 |
| Noninfectious enteritis and colitis | 555-556 |
| Other digestive diseases | 571.4-571.9, 577.1, 579.0-579.1, 579.8 |
| Nephritis, nephrosis | 581-583, 585-586, 588.0-588.1 |
| Skin diseases | 695.4 |
| Arthropathies | 710, 714 |
| Connective tissue diseases or disorders | 720, 728 |
| Osteopathies | 730.1, 732 |
| Spina bifida | 741 |
| Congenital anomalies (except spina bifida) | 742, 745-749, 750.3, 751.2, 751.61, 751.62, 752.7, 753, 754.3, 755.2-755.3, 755.55, 756, 758, 759.5, 759.7-759.8, 760.71 |
| Prematurity | 765 |
| Perinatal diseases | 770.7, 771.1-771.2 |
| Severe injury | 854, 952.0, 952.1, 994.1 |

**Note:** Include all paid, suspended, pending and denied claims.

### Table CCC-2: Codes to Assign the Prescreen Status Code

|  |  |
| --- | --- |
| Description | ICD-9-CM Diagnosis |
| Conduct disorder | 312 |
| Emotional disturbance | 313 |
| ADHD | 314 |
| Asthma | 493 |
| Failure to thrive | 783.0, 783.21, 783.4 |

**Note:** Include all paid, suspended, pending and denied claims.

### Table CCC-3: Codes to Identify Visit Types

|  |  |  |
| --- | --- | --- |
| Description | CPT | UB Revenue |
| Outpatient | 90801, 90802, 90804-90815, 90951-90959, 90963-90965, 90967-90969, 99201-99205, 99211-99215, 99217-99220, 99241-99245, 99341-99345, 99347-99350, 99381-99384, 99391-99394, 99401-99404, 99411, 99412, 99420, 99429 | 051x, 0520-0523, 0526-0529, 057x-059x, 082x-085x, 088x, 0982, 0983 |
| Nonacute inpatient | 99304-99310, 99315, 99316, 99318, 99324-99328, 99334-99337 | 0118, 0128, 0138, 0148, 0158, 019x, 0524, 0525 |
| Acute inpatient | 90816-90819, 90821-90824, 90826-90829, 99221-99223, 99231-99233, 99238, 99239, 99251-99255, 99291, 99292, 99460-99463, 99468, 99469, 99471, 99472, 99475-99480 | 010x, 0110-0114, 0119, 0120-0124, 0129, 0130-0134, 0139, 0140-0144, 0149, 0150-0154, 0159, 016x, 017x, 020x, 021x, 072x, 080x, 0987 |
| Emergency department | 99281-99285 | 045x, 0981 |

**Note:** Include all paid, suspended, pending and denied claims.

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### Table S-2 (CCC): Standardized Layout for Sample Frame Data File (Child Survey With CCC)

| Required Data Element | Field Positions | | | Value Labels |
| --- | --- | --- | --- | --- |
| Length | Start | End |
| Health care organization name | 60 | 1 | 60 |  |
| Product line\* | 1 | 61 | 61 | 1 = Commercial 2 = Medicaid |
| Product\* | 1 | 62 | 62 | 1 = HMO 2 = POS 3 = PPO |
| Subscriber or family ID number | 25 | 63 | 87 |  |
| Member-unique ID | 25 | 88 | 112 | This ID differentiates between individuals when family members share the subscriber ID |
| Member first name | 25 | 113 | 137 |  |
| Member middle initial | 1 | 138 | 138 |  |
| Member last name | 25 | 139 | 163 |  |
| Member gender\* | 1 | 164 | 164 | 1 = Male 2 = Female 9 = Missing/not available |
| Member date of birth | 8 | 165 | 172 | MMDDYYYY |
| Member mailing address 1 | 50 | 173 | 222 | Street address or post office box |
| Member mailing address 2 | 50 | 223 | 272 | Mailing address 2nd line (if needed) |
| Member city | 30 | 273 | 302 |  |
| Member state | 2 | 303 | 304 | 2-character state abbreviation |
| Member zip code | 5 | 305 | 309 | 5-digit number |
| Member telephone number | 10 | 310 | 319 | 3-digit area code plus 7-digit phone number; no separators or delimiters |
| Parent/caretaker first name | 25 | 320 | 344 | Required only if mailing materials are to be addressed to the parent or caretaker |
| Parent/caretaker middle initial | 1 | 345 | 345 | Required only if mailing materials are to be addressed to the parent or caretaker |
| Parent/caretaker last name | 25 | 346 | 370 | Required only if mailing materials are to be addressed to the parent or caretaker |
| Prescreen status code\* | 1 | 371 | 371 | 1 = No claims or encounters that meet criteria 2 = Claims or encounters that meet criteria |

\*A valid value is required for every member in the record.

*Note*

* *For the CAHPS 5.0H Child Survey, the health plan selects one of the following options for personalizing correspondence and, based on this determination, provides either the parent/caretaker’s mailing address or child member’s mailing address information in field positions 173–309:*
* *Parent/caretaker’s name and child’s name are used in all cover letters, postcards and envelopes.   
  Parent/caretaker’s address is used for addressing all mailing pieces.*
* *Child surveys are addressed “To the parent/caretaker of [child member’s name].” Child member’s address is used for addressing all mailing pieces.*

Sampling Protocol

Children with chronic conditions represent a relatively small proportion of the general population of children. To achieve a sufficient number of complete surveys for CCC results to be calculated, a supplemental sample of children who are more likely to have a chronic condition is selected and added to the standard CAHPS 5.0H Child Survey sample.

The survey vendor selects the CCC supplemental sample after the CAHPS 5.0H Child Survey sample is drawn. Employing the required sample size, as indicated in Table CCC-4, the survey vendor selects the CCC supplemental sample from the set of members with a prescreen status code of **2** who were not already selected for the CAHPS 5.0H Child Survey sample. For health plans with fewer members than the required sample size, the sample includes all members with a prescreen status code of **2** who were not already selected for the CAHPS 5.0H Child Survey sample.

The survey vendor combines the CAHPS 5.0H Child Survey sample and the CCC supplemental sample for survey administration and submission of data to NCQA for calculation of survey results.

### Table CCC-4: CAHPS 5.0H Child Survey and CCC Sample Sizes

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Survey | CAHPS 5.0H Child Survey Required Sample Size | | CCC Supplemental Sample Required Sample Size | Total Sample Size |
| Child Commercial | 900 | | 1,375 | 2,275 |
| Child Medicaid | 1,650 | | 1,840 | 3,490 |
| Oversampling | | | Health plans may oversample using rates in increments of 5 percent (e.g., 5, 10, 15). Final sample sizes for oversampling rates of 5 percent–30 percent are provided in Table CCC-5. The survey vendor calculates the FSS for oversampling rates greater than 30 percent using the following formula.  FSS = RSS x Oversampling Rate (round up)  Health plans can contact NCQA to request approval to oversample for the CAHPS 5.0H Child Survey sample without oversampling for the CCC supplemental sample. | | | |

### Table CCC-5: CAHPS 5.0H Child Survey and CCC Oversampling Rates and Final Sample Sizes

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Survey Type | Required Sample Size | Oversampling Rate and Final Sample Size | | | | | |
| 5% | 10% | 15% | 20% | 25% | 30% |
| **Child Commercial** | | | | | | | |
| CAHPS 5.0H child survey sample | 900 | 945 | 990 | 1,035 | 1,080 | 1,125 | 1,170 |
| CCC supplemental sample | 1,375 | 1,444 | 1,513 | 1,582 | 1,650 | 1,719 | 1,788 |
| ***Total sample size*** | 2,275 | 2,389 | 2,503 | 2,617 | 2,730 | 2,844 | 2,958 |
| **Child Medicaid** | | | | | | | |
| CAHPS 5.0H child survey sample | 1,650 | 1,733 | 1,815 | 1,898 | 1,980 | 2,063 | 2,145 |
| CCC supplemental sample | 1,840 | 1,932 | 2,024 | 2,116 | 2,208 | 2,300 | 2,392 |
| ***Total sample size*** | 3,490 | 3,665 | 3,839 | 4,014 | 4,188 | 4,363 | 4,537 |

Data Collection Protocol

|  |  |
| --- | --- |
| Questionnaire | The survey vendor uses the CAHPS Health Plan Survey 5.0H, Child Version (With CCC Measure) version of the questionnaire during the mail phase of the protocol. |
| Telephone materials | The survey vendor uses the CAHPS Health Plan Survey 5.0H, Child Version (With CCC Measure) version of the CATI script during the telephone phase of the protocol. |

Data Elements for Reporting

Health plans and survey vendors that submit CCC data to NCQA must provide the following data elements (in addition to those reported for the CAHPS Health Plan Survey 5.0H, Child Version).

### Table CCC-6: Data Elements for Children With Chronic Conditions

|  |
| --- |
| Member-Level Record |
| Prescreen status code |
| Sample code |

Calculation of Children With Chronic Conditions

Specific Guidelines for Calculation of Children With Chronic Conditions

|  |  |
| --- | --- |
| Specific guidelines | The *Specific Guidelines for Calculation of HEDIS/CAHPS Survey Results* are applied during the calculation of CCC results. |
| Results | Health plans that collect CCC results receive two separate sets of results: one for the general population and one for the population of children with chronic conditions. For each population, results include the same ratings, composites and individual question summary rates as those reported for the CAHPS Health Plan Survey 5.0H, Child Version. In addition, five CCC-specific results are calculated for each population.  CCC results for the general population are provided so that health plans can compare the general and CCC populations and are not eligible for public reporting. |
| General population | All child members who were randomly selected by the survey vendor for the CAHPS 5.0H child survey during sampling. |
| CCC population | All children identified as having a chronic condition, as defined by the member’s responses to the CCC survey-based screening tool.  The general population data set and CCC population data set are not mutually exclusive groups. For example, if a child member is randomly selected for the CAHPS child survey sample and is identified as having a chronic condition based on responses to the CCC survey-based screening tool, the member is included in general population and CCC population results. |
| CCC survey-based screening tool | A survey-based screening tool is used to identify children with chronic conditions. Table CCC-7 lists the questions for the CCC screening tool, which contains five sections representing five different health consequences; four are three-question components and one is a two-question component. A child member is identified as having a chronic condition if *all* questions for *at least one* specific health consequence are answered “Yes.” |

### Table CCC-7: CCC Survey-Based Screening Tool

|  |  |  |
| --- | --- | --- |
| Use of or Need for Prescription Medicines | | Response Choices |
| **Q60** | Does your child currently need or use medicine prescribed by a doctor (other than vitamins)? | Yes No 🡺If No, Go to Question 63 |
| **Q61** | Is this because of any medical, behavioral, or other health condition? | Yes No 🡺If No, Go to Question 63 |
| **Q62** | Is this a condition that has lasted or is expected to last for at least 12 months? | Yes No |
| Above-Average Use or Need for Medical, Mental Health or Education Services | | Response Choices |
| **Q63** | Does your child need or use more medical care, more mental health services, or more educational services than is usual for most children of the same age? | Yes No 🡺If No, Go to Question 66 |
| **Q64** | Is this because of any medical, behavioral, or other health condition? | Yes No 🡺If No, Go to Question 66 |
| **Q65** | Is this a condition that has lasted or is expected to last for at least 12 months? | Yes No |

### Table CCC-7: CCC Survey-Based Screening Tool *(continued)*

|  |  |  |
| --- | --- | --- |
| Functional Limitations Compared With Others of Same Age | | Response Choices |
| **Q66** | Is your child limited or prevented in any way in his or her ability to do the things most children of the same age can do? | Yes No 🡺If No, Go to Question 69 |
| **Q67** | Is this because of any medical, behavioral, or other health condition? | Yes No 🡺If No, Go to Question 69 |
| **Q68** | Is this a condition that has lasted or is expected to last for at least 12 months? | Yes No |
| Use of or Need for Specialized Therapies | | Response Choices |
| **Q69** | Does your child need or get special therapy such as physical, occupational, or speech therapy? | Yes No 🡺If No, Go to Question 72 |
| **Q70** | Is this because of any medical, behavioral, or other health condition? | Yes No 🡺If No, Go to Question 72 |
| **Q71** | Is this a condition that has lasted or is expected to last for at least 12 months? | Yes No |
| Treatment or Counseling for Emotional or Developmental Problems | | Response Choices |
| **Q72** | Does your child have any kind of emotional, developmental, or behavioral problem for which he or she needs or gets treatment or counseling? | Yes No 🡺 If No, Go to Question 74 |
| **Q73** | Has this problem lasted or is it expected to last for at least 12 months? | Yes No |

Children With Chronic Conditions Composites

Table CCC-8 displays the composite questions, response choices and corresponding score values used to calculate results.

### Table CCC-8: CCC Composites

|  |  |  |  |
| --- | --- | --- | --- |
| Access to Specialized Services | | Response Choices | Score Values |
| **Q20** | In the last 6 months, how often was it easy to get special medical equipment or devices for your child? | Never  Sometimes  Usually  Always | 1  1  2  3 |
| **Q23** | In the last 6 months, how often was it easy to get this therapy for your child? | Never  Sometimes  Usually  Always | 1  1  2  3 |
| **Q26** | In the last 6 months, how often was it easy to get this treatment or counseling for your child? | Never  Sometimes  Usually  Always | 1  1  2  3 |
| Family-Centered Care: Personal Doctor Who Knows Child | | Response Choices | Score Values |
| **Q38** | In the last 6 months, did your child’s personal doctor talk with you about how your child is feeling, growing, or behaving? | Yes  No | 1  0 |
| **Q43** | Does your child’s personal doctor understand how these medical,behavioral, or other health conditions affect your child’s day-to-day life? | Yes  No | 1  0 |
| **Q44** | Does your child’s personal doctor understand how your child’s medical, behavioral, or other health conditions affect your family’s day-to-day life? | Yes  No | 1  0 |

### Table CCC-8: CCC Composites *(continued)*

|  |  |  |  |
| --- | --- | --- | --- |
| Coordination of Care for Children With Chronic Conditions | | Response Choices | Score Values |
| **Q18** | In the last 6 months, did you get the help you needed from your child’s doctors or other health providers in contacting your child’s school or daycare? | Yes  No | 1  0 |
| **Q29** | In the last 6 months, did anyone from your child’s health plan, doctor’s office, or clinic help coordinate your child’s care among these different providers or services? | Yes  No | 1  0 |

The Access to Specialized Services composite is composed of questions with response choices of “Never,” “Sometimes,” “Usually” and “Always.” The means, variances, global proportions and global proportion variances for this composite are scored using the same calculations as those used to score HEDIS/CAHPS composites (e.g., Getting Care Quickly)*.*

|  |  |
| --- | --- |
| Composites with dichotomous response choices | The following two composites are composed of questions with response choices of “Yes” and “No”:   1. Family Centered Care: Personal Doctor Who Knows Child. 2. Coordination of Care for Children With Chronic Conditions.   Means and variances are not calculated for these two composites. The global proportions for these composites are scored using the same calculations as those used to score HEDIS/CAHPS composites. One global proportion variance is calculated for the global proportion “Yes.” One set of score values is used to calculate the global proportions and global proportion variances for these composites (refer to Table CCC-8 for score values). |

Question Summary Rates

Table CCC-9 provides numerators and denominators used to calculate CCC question summary rates. Means, Variances and Question Summary Rate Variances are calculated for *Family Centered Care: Getting Needed Information* and *Access to Prescription Medicines*.

### Table CCC-9: CCC Question Summary Rates

|  |  |  |  |
| --- | --- | --- | --- |
|  | Family Centered Care: Getting Needed Information | Numerators | Denominator |
| **Q9** | In the last 6 months, how often did you have your questions answered by your child’s doctors or other health providers? | Never + Sometimes  Usually  Always  Always + Usually | Always + Usually + Sometimes + Never |
|  | Access to Prescription Medicines | Numerators | Denominator |
| **Q56** | In the last 6 months, how often was it easy to get prescription medicines for your child through his or her health plan? | Never + Sometimes  Usually  Always  Always + Usually | Always + Usually + Sometimes + Never |
|  | CCC Question Summary Rates | Numerators | Denominator |
| **Q18** | In the last 6 months, did you get the help you needed from your child’s doctors or other health providers in contacting your child’s school or daycare? | Yes | Yes + No |
| **Q20** | In the last 6 months, how often was it easy to get special medical equipment or devices for your child? | Always + Usually Always | Always + Usually + Sometimes + Never |
| **Q21** | Did anyone from your child’s health plan, doctor’s office, or clinic help you get special medical equipment or devices for your child? | Yes | Yes + No |

### Table CCC-9: CCC Question Summary Rates *(continued)*

|  |  |  |  |
| --- | --- | --- | --- |
|  | CCC Question Summary Rates | Numerators | Denominator |
| **Q23** | In the last 6 months, how often was it easy to get this therapy for your child? | Always + Usually Always | Always + Usually + Sometimes + Never |
| **Q24** | Did anyone from your child’s health plan, doctor’s office, or clinic help you get this therapy for your child? | Yes | Yes + No |
| **Q26** | In the last 6 months, how often was it easy to get this treatment or counseling for your child? | Always + Usually Always | Always + Usually + Sometimes + Never |
| **Q27** | Did anyone from your child’s health plan, doctor’s office, or clinic help you get this treatment or counseling for your child? | Yes | Yes + No |
| **Q29** | In the last 6 months, did anyone from your child’s health plan, doctor’s office, or clinic help coordinate your child’s care among these different providers or services? | Yes | Yes + No |
| **Q38** | In the last 6 months, did your child’s personal doctor talk with you about how your child is feeling, growing, or behaving? | Yes | Yes + No |
| **Q43** | Does your child’s personal doctor understand how these medical, behavioral, or other health conditions affect your child’s day-to-day life? | Yes | Yes + No |
| **Q44** | Does your child’s personal doctor understand how your child’s medical, behavioral, or other health conditions affect your family’s day-to-day life? | Yes | Yes + No |
| **Q57** | Did anyone from your child’s health plan, doctor’s office, or clinic help you get your child’s prescription medicines? | Yes | Yes + No |