

SUMMARY OF CHANGES IN SECTION IIA OF THE FFY 2012 CHIP ANNUAL REPORTING TEMPLATE SYSTEM (CARTS)

This document summarizes key changes to Section IIA of CARTS to facilitate states' voluntary reporting of the initial core set of children's health care quality measures for FFY 2012. Additional guidance on measure-by-measure changes to the technical specifications is provided in Technical Specifications and Resource Manual for Federal Fiscal Year 2012 Reporting.

- **“Numerator” and “Denominator” fields.** For each measure in Section IIA, CARTS will now allow states to enter both integers and decimals (e.g., 24.2) in the “Numerator” and “Denominator” fields.
- **Auto-calculation of rates.** For each measure in Section IIA, CARTS will no longer auto-calculate a rate based on the numerator and denominator provided by the state. States should provide a numerator, denominator, and rate for each measure.
- **Reporting aggregate rates.** When a state combines data across multiple reporting units, all or some of which use the hybrid method, the state should enter zeros in the “Numerator” and “Denominator” fields, and report the state-level rate in the “Rate” field. When possible, states should provide individual reporting unit numerators, denominators, and rates in the field labeled “Additional Notes/Comments on Measure,” along with a description of the method used to determine the state-level rate.
- **“Additional Notes/Comments on Measure” field.** For each measure, the “Additional Notes/Comments on Measure” field now allows states to enter up to 1,500 characters. States are encouraged to use this field to provide additional information about methods used to derive rates or other information about the measure that may be useful to CMS; the “Other Comments on Measure” field has been removed from each measure.
- **Explanation of progress.** States are no longer asked to provide information on state progress or annual performance objectives; the “Explanation of Progress” fields have been removed from each measure.
- **Measure information.** Measure names, descriptions, and measure stewards have been updated to align with the initial core set resource manual. Additional information on changes to individual measure reporting requirements or CARTS functionality are provided in the table below.

Measure-By-Measure CARTS Changes

Measure		Description	Summary of Changes
13	Percentage of Eligibles that Received Preventive Dental Services	Percentage of individuals ages 1 to 20 that are enrolled in Medicaid or CHIP Medicaid Expansion programs, are eligible for EPSDT services, and that received preventive dental services	Added guidance that CMS will calculate Measure 13 (Preventive Dental Services) for states based on data submitted as part of the EPSDT report (CMS-416). States will not be able to provide data for this measure in CARTS. Because the denominator for this measure includes only individuals enrolled in a Medicaid or CHIP Medicaid expansion program determined to be eligible for EPSDT services, states reporting data about a separate CHIP program should provide dental data in Section IIIIG of the CARTS report.
16	Otitis Media with Effusion (OME) – Avoidance of Inappropriate Use of Systemic Antimicrobials in Children	Percentage of children ages 2 months to 12 years with a diagnosis of otitis media with effusion (OME) that were not prescribed systemic antimicrobials	Added guidance that Measure 16 (OME) is on hold because CPT II codes required for this measure are not commonly used by states. States will not be able to provide data for this measure in CARTS.
17	Percentage of Eligibles that Received Dental Treatment Services	Percentage of individuals ages 1 to 20 that are enrolled in Medicaid or CHIP Medicaid Expansion programs, are eligible for EPSDT services, and that received dental treatment services	Added guidance that CMS will calculate Measure 17 (Dental Treatment Services) for states based on data submitted as part of the EPSDT report (CMS-416). States will not be able to provide data for this measure in CARTS. Because the denominator for this measure includes only individuals enrolled in a Medicaid or CHIP Medicaid expansion program determined to be eligible for EPSDT services, states reporting data about a separate CHIP program should provide dental data in Section IIIIG of the CARTS report.
18	Ambulatory Care – Emergency Department (ED) Visits	Rate of ED visits per 1,000 member months among children up to age 19	Added fields for four separate rates, including three age-specific rates (<1 year, 1 to 9 years, and 10 to 19 years), and one total rate.

Measure		Description	Summary of Changes
19	Pediatric Central Line Associated Blood Stream Infections – Neonatal Intensive Care Unit and Pediatric Intensive Care Unit	Rate of central line-associated blood stream infections (CLABSI) in the pediatric and neonatal intensive care units during periods selected for surveillance	Added guidance that CMS will calculate Measure 19 (CLABSI) for states based on data submitted to the National Healthcare Safety Network. States will not be able to provide data for this measure in CARTS.
24	Consumer Assessment of Healthcare Providers and Systems® (CAHPS) 4.0H (Child Version Including Medicaid and Children with Chronic Conditions Supplemental Items)	Survey on parents' experiences with their children's care	<p>Added information on CAHPS FFY2013 reporting for Title XXI and Title XIX programs.</p> <p>Added fields for indicating version of CAHPS survey used and supplemental item sets included in survey. Removed field for indicating how CAHPS data was reported. States are unable to submit CAHPS data to the Agency for Healthcare Research and Quality's (AHRQ) CAHPS Database in 2012</p>