

## 2025 CCO Incentive Measures and Benchmarks

| #  | Measure  | NQF Number | Measure Description   | Benchmarks and Improvement Targets | Data Source*                                 |
|----|--|------------|---|------------------------------------|--|
| 1  | Childhood Immunization Status (Combo 3)  | 0038       | Percentage of children that turned 2 years old during the measurement year and had the Dtap, IPV, MMR, HiB, HepB, VZV, and PCV vaccines by their second birthday.   | TBD                                | Claims/ Immunization Registry                |
| 2  | Immunizations for Adolescents (Combo 2)  | 1407       | Percentage of adolescents that turned 13 years old during the measurement year and had the meningococcal, Tdap, and HPV vaccines by their 13th birthday.  | TBD                                | Claims/ Immunization Registry                |
| 3  | Child and Adolescent Well-Care Visits (incentivized for children ages 3-6, kindergarten readiness)                     | 1516       | Percentage of children ages 3 to 6 that had one or more well-child visits with a PCP during the measurement year.   | TBD                                | Claims/Clinical Data                         |
| 4  | Prenatal & Postpartum Care - Postpartum Care   | 1517       | Percentage of deliveries of live births between October 8 of the year prior to the measurement year and October 7 of the measurement year that had a postpartum visit on or between 7 and 84 days after delivery.   | TBD                                | Claims/Clinical Data                         |
| 5  | Screening for Depression and Follow-Up Plan  | 0418       | Percentage of patients aged 12 years and older screened for depression on the date of the encounter or up to 14 days prior to the date of the encounter using an age-appropriate standardized depression screening tool AND if positive, a follow-up plan is documented on the date of the eligible encounter.  | TBD                                | Claims/Clinical Data ( <i>eCQM measure</i> ) |
| 6  | Health Aspects of Kindergarten Readiness: Child-Level Social-Emotional Health  | N/A        | Percentage of children ages 1-5 (kindergarten readiness) who received an issue-focused intervention/treatment service.  | TBD                                | Plans Reporting                              |
| 7  | Members Receiving Preventive Dental or Oral Health Services, ages 1-5 (kindergarten readiness) and 6-14                | NA         | Percentage of enrolled children ages 1-5 (kindergarten readiness) and 6-14 who received a preventive dental or oral health service during the measurement year  | TBD                                | Claims                                       |
| 8  | Oral Evaluation for Adults with Diabetes   | NA         | Percentage of adults with diabetes who received at least one oral evaluation within the reporting year.   | TBD                                | Claims                                       |
| 9  | Assessments for Children in ODHS Custody   | NA         | Percentage of children ages 0-17 who received a physical health assessment, children ages 1-17 who received a dental health assessment, and children ages 4-17 who received a mental health assessment within 60 days of the state notifying CCOs that the children were placed into custody with the Department of Human Services (foster care).   | TBD                                | Claims/Social Service Data                   |
| 10 | Comprehensive Diabetes Care: Hemoglobin A1c (HbA1c) Poor Control (>9.0%)   | 0059       | Percentage of patients 18-75 years of age with diabetes who had hemoglobin A1c > 9.0% during the measurement period.  | TBD                                | Claims/Clinical Data ( <i>eCQM measure</i> ) |
| 11 | Initiation and Engagement of Substance Use Disorder Treatment  | 0004       | Initiation and Engagement of Substance Use Disorder Treatment.  | TBD                                | Claims                                       |
| 12 | Health Equity Measure: Meaningful Language Access to Health Care Services for persons with limited English proficiency | NA         | The proportion of visits with spoken and sign language interpreter needs that were provided with OHA qualified or certified interpreter services.   | TBD                                | Plan Reporting                               |
| 13 | Social Determinants of Health: Social Needs Screening & Referral   | NA         | To build system capacity, this measure requires CCOs to (1) prepare for equitable, trauma-informed, and culturally responsive screening and referrals, (2) work with community-based organizations to build capacity for referrals and meeting social needs, and (3) support data sharing between CCOs, providers, and community-based organizations. Later, CCOs start reporting social needs screening and referral data. | TBD                                | Attestation and Plan Reporting               |

MY = Measurement Year

\*(Data Source\*) Clinical data includes electronic health records, registry data, and paper medical records. Claims/clinical data includes measures that require claims and clinical data, and measures that require claims or claims and clinical data. Electronic clinical quality measures (eCQMs) are indicated using italic font.