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## 2025 QIP Quality Measure Set

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# Agenda

- 2025 QIP Measure List and Targets
- The Relevant 2025 QIP Quality Measure Set
- Notes on Partnership QIP Denominators
- Monitoring Measure: Breast Cancer Screening (40-51yo)
- Monitoring Measure: Chlamydia Screening
- Monitoring Measure: Well-Child Visits in the First 15-30 Months of Life
- Monitoring Measure: Topical Fluoride for Children
- Other QIP Measure Definition Changes
- Next Steps



# 2025 QIP Measure List and Targets



# List of 2025 Measures That Will Soon Be Available in Relevant

Section/Measure	2025 QIP Measure Name	Family Medicine	Internal Medicine	Pediatrics
Clinical Domain				
Measure 1	Breast Cancer Screening (50 to 74 years)	Yes	Yes	
Measure 2	Cervical Cancer Screening	Yes	Yes	
Measure 3	Child and Adolescent Well-Care Visits	Yes		Yes
Measure 4	Childhood Immunization Status - Combo 10	Yes		Yes
Measure 5	Chlamydia Screening (16-20yo)			Yes
Measure 6	Colorectal Cancer Screening	Yes	Yes	
Measure 7	Comprehensive Diabetes Management – HbA1c Good Control	Yes	Yes	
Measure 8	Comprehensive Diabetes Management – Retinal Eye Exam	Yes	Yes	
Measure 9	Controlling High Blood Pressure	Yes	Yes	
Measure 10	Lead Screening in Children	Yes		Yes
Measure 11	Immunizations for Adolescents	Yes		Yes
Measure 12	Reducing Healthcare Disparity	Optional	Optional	Optional
Measure 13	Well-Child Visits in the First 15 Months of Life	Yes		Yes
Measure 14	Well-Child Visits in the First 15-30 Months of Life			Yes
Monitoring Measures				
Monitoring Measure 1	Breast Cancer Screening (40-51yo)	Yes	Yes	
Monitoring Measure 2	Chlamydia Screening (16-24yo)	Yes		
Monitoring Measure 3	Chlamydia Screening (21-24yo)		Yes	
Monitoring Measure 4	Topical Fluoride for Children	Yes		Yes
Monitoring Measure 5	Well-Child Visits in the First 15-30 Months of Life	Yes		

Blue highlighting = new measure      Grey highlighting = not a clinical measure in Relevant



# Numerator Percentage Targets for Full and Partial Points

Measure Name	2025	
	Full Target	Partial Target
Breast Cancer Screening	63.48%	59.51%
Cervical Cancer Screening	67.46%	61.56%
Child and Adolescent Well-Care Visits	64.74%	58.07%
Childhood Immunization Status - Combo 10	42.34%	34.79%
Colorectal Cancer Screening	43.71%	38.07%
Comprehensive Diabetes Management – HbA1c Good Control	63.50%	60.83%
Comprehensive Diabetes Management – Retinal Eye Exam	64.06%	59.41%
Controlling High Blood Pressure	72.75%	69.37%
Lead Screening in Children	79.51%	71.11%
Immunizations for Adolescents	48.80%	40.88%
Well-Child Visits in the First 15 Months of Life	69.67%	64.99%

Measure Name	2025	
	Full Target	Target basis
Breast Cancer Screening (40-51yo)	52.68%	50th percentile
Topical Fluoride for Children	19.30%	25th percentile
Chlamydia Screening (all age ranges)	55.95%	50th percentile
Well-Child Visits in the First 15-30 Months of Life	69.43%	50th percentile



# Change in 2025 Targets Relative to 2024

Measure Name	2024 to 2025 Difference		
	Full Target	Partial Target	Change
Breast Cancer Screening	0.11%	7.31%	50th to 75th percentile
Cervical Cancer Screening	0.98%	4.45%	50th to 75th percentile
Child and Adolescent Well-Care Visits	3.59%	10.00%	50th to 75th percentile
Childhood Immunization Status - Combo 10	-2.92%	3.89%	50th to 75th percentile
Colorectal Cancer Screening	3.90%	6.39%	Full: 50th to 75th Partial: 25th to 50th
Comprehensive Diabetes Management – HbA1c Good Control	3.16%	8.52%	50th to 75th percentile
Comprehensive Diabetes Management – Retinal Eye Exam	0.73%	7.10%	50th to 75th percentile
Controlling High Blood Pressure	0.53%	8.06%	50th to 75th percentile
Lead Screening in Children	16.72%	--	Full: 50th to 90th Partial: No points in 2024
Immunizations for Adolescents	0.00%	6.57%	50th to 75th percentile
Well-Child Visits in the First 15 Months of Life	1.58%	6.61%	50th to 75th percentile

*Yellow highlighting = Partial target change from 50<sup>th</sup> percentile to 75<sup>th</sup> percentile*

*Orange highlighting = Other target change*



# QIP Measure Names in the 2025 eReports Denominator Files

QIP Measure Name
Breast Cancer Screening 2025
Breast Cancer Screening Monitoring 2025
Cervical Cancer Screening 2025
Child and Adolescent Well Care 2025
Childhood Immunization Status CIS 10 2025
Chlamydia Screening 2025
Colorectal Cancer Screening 2025
Controlling High Blood Pressure 2025
Diabetes - HbA1C Good Control 2025
Diabetes - Retinal Eye exam 2025
Immunization for Adolescents 2025
Lead Screening Children 2025
Topical Fluoride in Children 2025
Well Child First 15-30 Months 2025
Well Child First 15 Months 2025

15 measures

*Green highlighting =  
monitoring measures*



# **The Relevant 2025 QIP Quality Measure Set**





# QIP Denominator Lists

- Partnership provides the measure denominators monthly on the eReports website.
- These can be downloaded by the health center
- Health centers that upload them to Relevant (in a standard manner) can have the QIP Quality Measures display the exact monthly denominator
- This enhances the health center's ability to directly monitor QIP patients. The Quality Measure numerator combines QIP and Relevant data
- The health center also needs to download the monthly Partnership membership list and have crosswalk or roster queries match these patients to EHR patients and integrate them into Relevant



# All-Patient QIP Measures

- Versions of the QIP Quality Measures will also be available that display all patients who meet denominator criteria
- Health centers that do not consistently download QIP denominator lists or Partnership membership lists can use the all-patient measures to approximate the QIP population (for example, by filtering for patients with Partnership as the primary insurance)
- Other health centers can request all-patient versions if they are helpful (or copy them from the Aliados Health aggregate)



# List of 2025 Relevant QIP Quality Measures

QIP Measure Name	2025 Relevant QM Name
Breast Cancer Screening (50 to 74 years)	Breast Cancer Screening (QIP 2025)
Cervical Cancer Screening	Cervical Cancer Screening (QIP 2025)
Child and Adolescent Well-Care Visits	Child and Adolescent Well-Care Visits (QIP 2025)
Childhood Immunization Status - Combo 10	Childhood Immunization Status (QIP 2025)
Chlamydia Screening (16-20yo)	Chlamydia Screening for Ages 16 to 20 Years (QIP 2025)
Colorectal Cancer Screening	Colorectal Cancer Screening (QIP 2025)
Comprehensive Diabetes Management – HbA1c Good Control	Diabetes: HbA1c Good Control ( $\leq 9\%$ ) (QIP 2025)
Comprehensive Diabetes Management – Retinal Eye Exam	Diabetes: Retinal Eye Exam (QIP 2025)
Controlling High Blood Pressure	Controlling High Blood Pressure (QIP 2025)
Lead Screening in Children	Lead Screening in Children (QIP 2025)
Immunizations for Adolescents	Immunizations for Adolescents (QIP 2025)
Well-Child Visits in the First 15 Months of Life	Well-Child Visits in the First 15 Months of Life (QIP 2025)
Well-Child Visits in the First 15-30 Months of Life	Well-Child Visits for Ages 15 Months–30 Months (QIP 2025)
Breast Cancer Screening (40-51yo)	Breast Cancer Screening for Ages 40 to 51 Years (QIP 2025)
Chlamydia Screening (16-24yo)	Chlamydia Screening for Ages 16 to 24 Years (QIP 2025)
Chlamydia Screening (21-24yo)	Chlamydia Screening for Ages 21 to 24 Years (QIP 2025)
Topical Fluoride for Children	Topical Fluoride for Children (QIP 2025)

*Blue highlighting = Measures for Internal Medicine or Pediatric Medicine only (not Family Medicine)*



# 2025 Relevant QIP Quality Measures

- Will be added to health center instances this month (March 2025)
- All measures will be updated according to 2025 QIP/HEDIS specifications
- Quality Measures using QIP denominators will have an upgraded measure\_result column that shows:
  - The patient CIN
  - The Partnership-supplied numerator
  - Relevant numerator detail (that can be shared with Partnership)
  - Relevant exclusion detail (that can be shared with Partnership)
- An additional reconciliation report is planned as well



# Notes on Partnership QIP Denominators



# Anticipated Denominators

- Note that the Partnership denominators are the anticipated denominators for the final population as of December 31, 2025
- This is different than the other kinds of Quality Measures where the denominator is the universe calculated at the end of the measurement period
- But this makes sense since you want to be able to recall patients on the list to get them preventive services now so that they are in the numerator of the measure at the end of 2025
- Childhood measures with cut-off ages will have denominator patients who have aged-out and would not need to be recalled



# Measures With Cut-Off Ages

- These denominators are defined by patients reaching a particular age (the cut-off age)

Measure name	Cut-off
Childhood Immunization Status	24 months of age
Immunizations for Adolescents	13 years of age
Lead Screening in Children	24 months of age
Well-Child Visits in the First 15 Months of Life	15 months of age
Well-Child Visits in the 15-30 Months of Life	30 months of age

- Other measures have denominator age ranges but do not include patients who have aged-out



# Example: Childhood Immunization Status

Taking the February 2025 denominator list at one health center

Age on 2/1/2025	
Age in months	Count
13	5
14	5
15	1
16	4
17	7
18	3
19	5
20	2
21	3
22	4
23	2
24	1

42

One patient had  
second birthday  
in January 2025  
(already aged  
out)

Age on 12/31/2025	
Age in months	Count
24	5
25	5
26	1
27	4
28	7
29	4
30	4
31	2
32	3
33	4
34	2
35	1

42

As expected, by  
December 31, 2025 all  
patients have reached  
24 months of age  
(they are in the true  
denominator for the  
evaluated  
measurement period  
ending 12/31/2025)

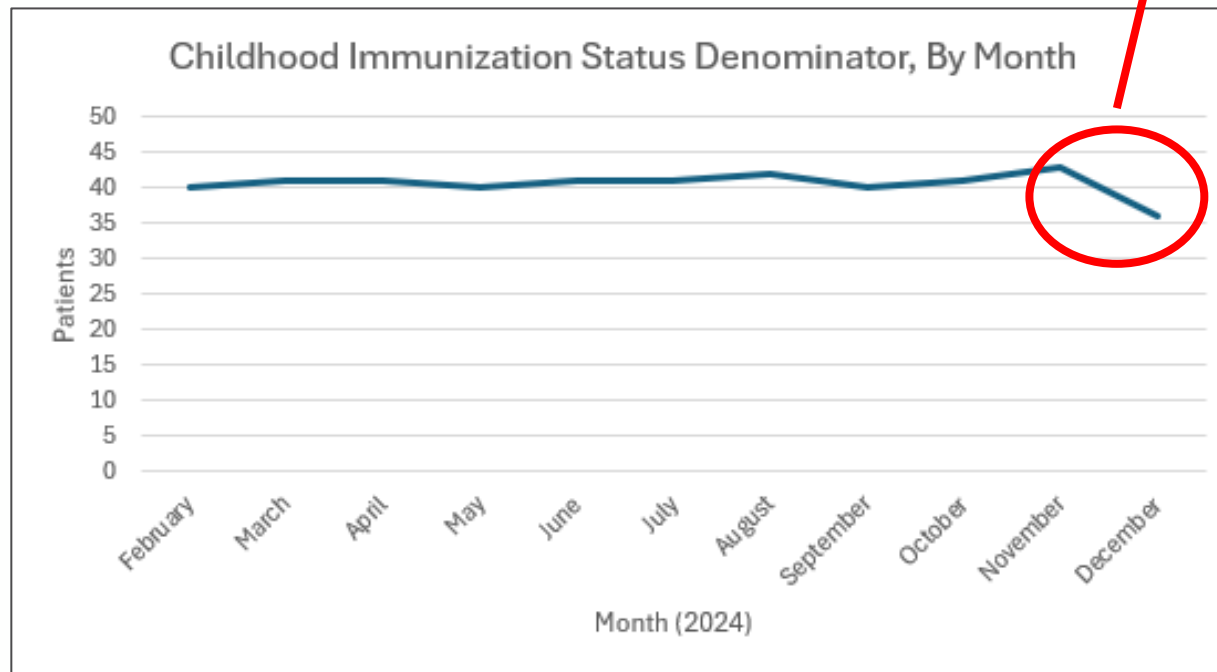




# Example: Childhood Immunization Status

Denominator change in 2024 at one health center

Observed drop-off for all measures



Month (2024)	Patients
February	40
March	41
April	41
May	40
June	41
July	41
August	42
September	40
October	41
November	43
December	36

Variation due to:

- New patients added
- Patients lose insurance
- Patients reach “continuous enrollment” (9 of 12 months)

*Illustrative example from one health center*



# Example: Childhood Immunization Status

Patients who “age out” as the year progresses

Month (2024)	24+ months of age		Total
	FALSE	TRUE	
February	39	1	40
March	36	5	41
April	33	8	41
May	28	12	40
June	25	15	40
July	22	19	41
August	20	23	43
September	14	26	40
October	12	29	41
November	10	33	43
December	0	36	36

FALSE = patient under 24 months of age and so an opportunity still exists for them to receive preventive services (if not already in numerator)

TRUE = patient aged-out (i.e., 24+ months of age) by the end of the month



# The Need for a Childhood Measure Case Management Report (Last DSIC Meeting)

- Example for patients under 24 months of age
- A patient with a specific age in months is evaluated according to their numerator status for three measures: Childhood Immunization Status, Lead Screening in Children, and Well-Child Visits in the First 15 Months of Life
- A risk score is assigned to patients not currently meeting the numerator for any measure. The “weight” of the score increases the further “behind” the patient is (for well-child visits or number of immunizations) and the closer the patient is to the cut-off age.
- All individual risk scores are added to make an overall priority score that can be used to sort lists for case management



# **Monitoring Measure: Breast Cancer Screening (40-51yo)**



# Breast Cancer Screening Specification (New Monitoring Measure)

**Denominator** for all-patients version:

- Sex assigned at birth = Female
- Age 42 to 51 on last day of measurement period
- At least one medical visit in the measurement period

**Numerator:**

- One or more mammograms in the 27 months before the end of the measurement period



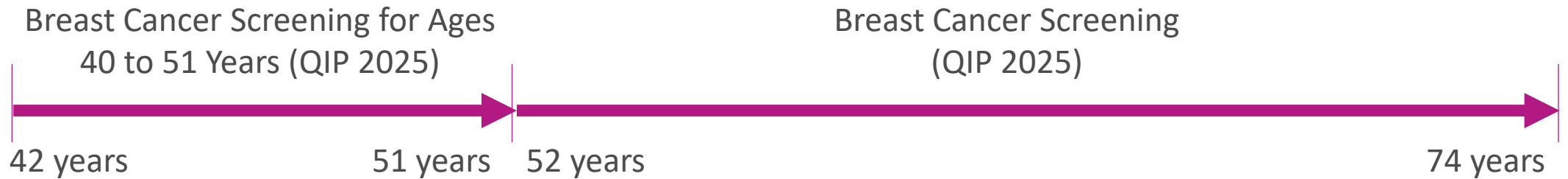
# Breast Cancer Screening Specification (New Monitoring Measure)

- **Exclusions:** Bilateral mastectomies, hospice, palliative care or the patient died
- In the specifications, Partnership recommends using the palliative care ICD code Z51.5. This code is included in the Value Set “Palliative Care Diagnosis” mentioned in Appendix A (page 96) of the Aliados Health document “2024 HEDIS Quality Measure Instructions”
- Exclusions for this age range are rare (under 0.4% overall, compared to around 1% for the 52 to 75 age range measure)



# The Two Breast Cancer Measures Together

## Name of Quality Measure

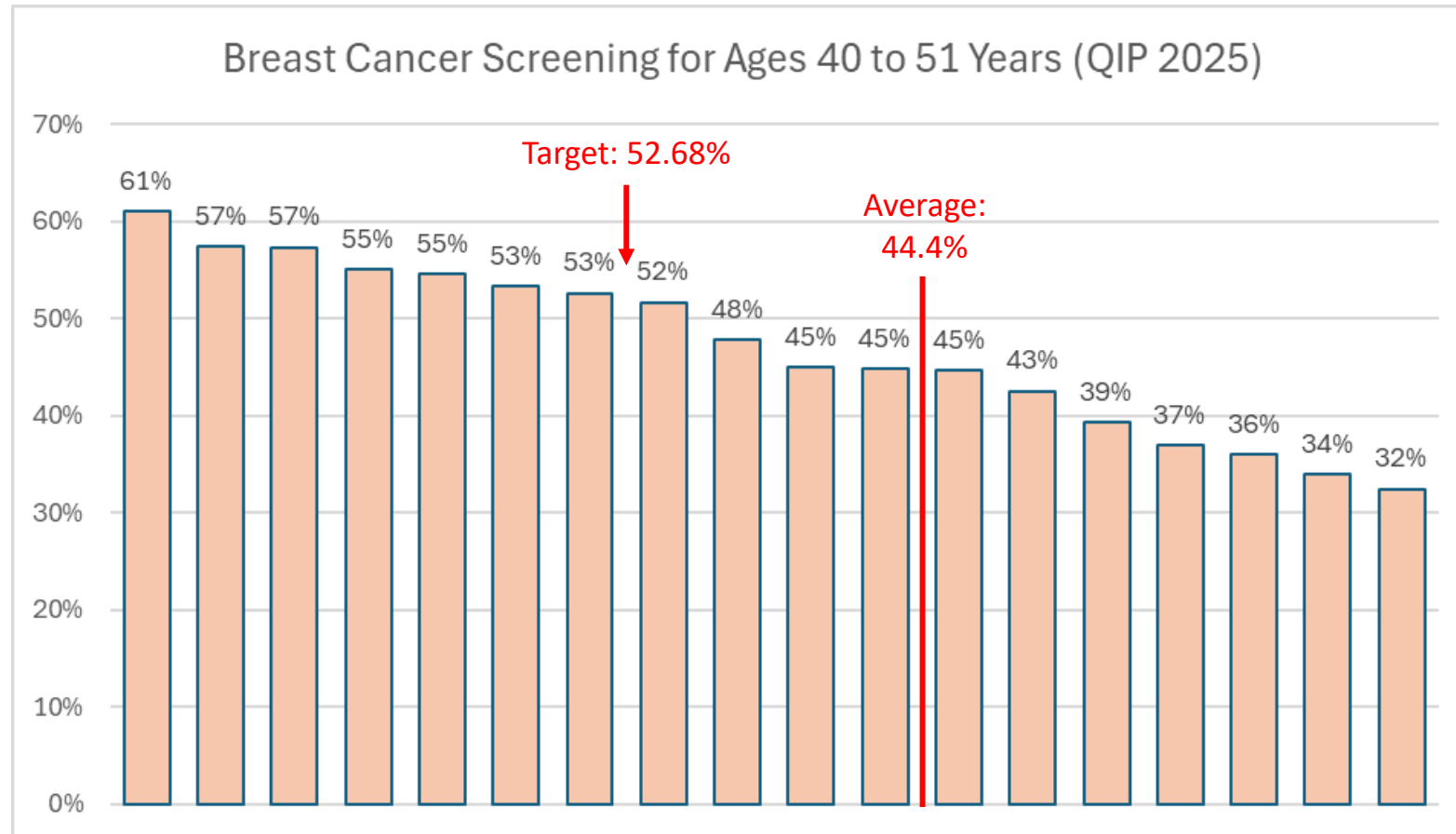


## Denominator age (calculated at end of measurement period)

- The age ranges of the two measures do not overlap and there is no gap between them
- Assumption: it will be one measure next year with a denominator 42 to 74 year range



# Health Center Data For Measurement Period January 1 to December 31, 2024



*For all patients, not just QIP denominator patients*





# Summary Data

- Breast Cancer Screening (denominator ages 42 to 51 years)
  - Average: 44.4%
  - Range: 32.4% to 61.1%
- Breast Cancer Screening (denominator ages 52 to 74 years)
  - Average: 55.3%
  - Range: 33.1% to 68.2%
- For all health centers together, adding the 42 to 51 year age group to the 52 to 74 year age group will increase the existing denominator by 59%



# Monitoring Measure: Chlamydia Screening



# Chlamydia Screening

- Similar to the existing MCAS Quality Measure in Relevant named “Chlamydia Screening in Women (Aligns with 2024 HEDIS Measure CHL)”
- The HEDIS definition in this measure includes patients who are sexually active, which is determined by Value Sets
- The QIP measure does NOT have sexual activity as part of the denominator and they stated that all patients in the age group should be screened



# Chlamydia Screening Specification

**Denominator** for all-patients version:

- Sex assigned at birth = Female
- At least one medical visit in the measurement period
- Different age groups (depending on the practice type)
  - Age 16 to 24 on last day of measurement period (Family Medicine)
  - Age 16 to 20 on last day of measurement period (Pediatric Medicine)
  - Age 21 to 24 on last day of measurement period (Internal Medicine)



# Chlamydia Screening Specification

## Numerator:

- At least one test for chlamydia during the measurement year

## Exclusions

- Hospice care or the patient died
- *Exclusions in the age range are extremely rare*

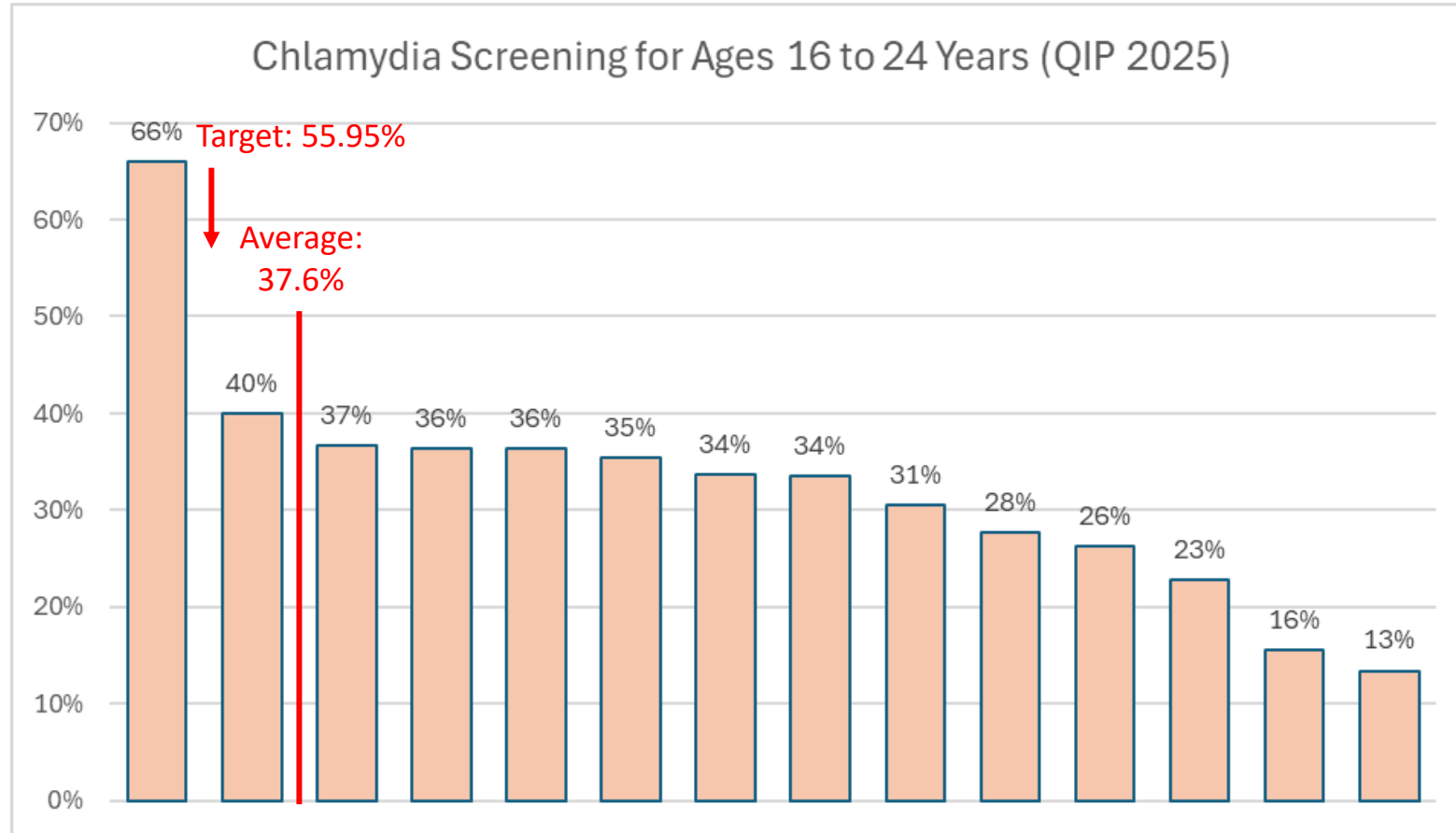


# Chlamydia Labs

- Some health centers need to add a Data Element for chlamydia screens
- Data Element: Chlamydia Labs
- HEDIS Value Set: Chlamydia Tests (OID = 2.16.840.1.113883.3.464.1004.1060)
- See Appendix A (page 91) of the Aliados Health document “2024 HEDIS Quality Measure Instructions”



# Health Center Data For Measurement Period January 1 to December 31, 2024



*For all patients, not just QIP denominator patients*



# Other Interesting Data

- Comparison of overall age group to the two sub-groups

Age range (years)	Average	Min	Max	Denominator proportion
16 to 24	37.6%	13.4%	66.0%	--
16 to 20	32.2%	11.8%	70.4%	59.3%
21 to 24	45.5%	16.7%	59.5%	40.7%

- The HEDIS measure has the same age group (16 to 24 years) but focuses on sexually active patients. The HEDIS measure denominator is 52% the size of the all-patients denominator

Status	Average	Min	Max
All patients	37.6%	13.4%	66.0%
Sexually active	58.3%	20.3%	71.4%





# **Monitoring Measure: Well-Child Visits in the First 15-30 Months of Life**



# Well-Child Visits (15-30 Months of Life)

- Similar to the existing MCAS Quality Measure in Relevant named “Well-Child Visits for Age 15 Months–30 Months (Aligns with 2024 HEDIS Measure W30)”
- This measure does not apply the “14-day” rule, but the QIP measure DOES apply the 14-day rule (reference on 2025 QIP specifications document, page 54)



# Well-Child Visits (15-30 Months of Life)

## Denominator:

- Patients who turn 30 months of age during the measurement period
- All-patients version also includes patients who had at least one medical visit in the measurement period (to define “current patients”)

## Exclusions:

- Had hospice or deceased during the measurement year



# Well-Child Visits (15-30 Months of Life)

**Numerator:** Two or more well-child visits on different dates of service between the child's 15-month birthday plus one day and the 30 month birthday AND there must be at least 14 days between each date of service

## **Measure 14. Well-Child Visits in the First 15-30 Months of Life (W30-2)<sup>17</sup>**

### **Numerator**

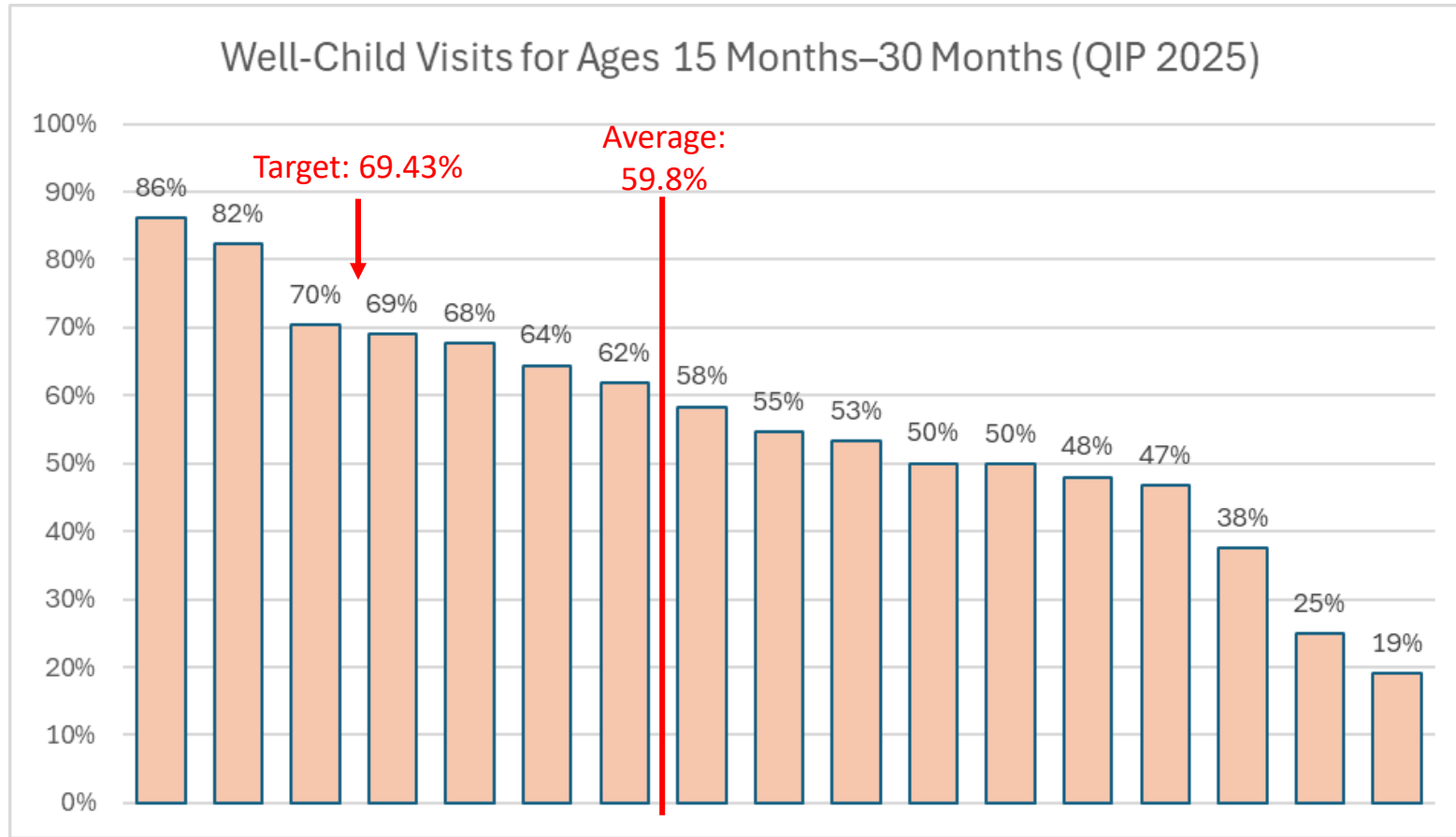
The number of children in the eligible population with two (2) or more well-child visits on different dates of service between the child's 15-month birthday plus one (1) day and the 30-month birthday.

### **14 Days Rule:**

**There must be at least 14 days between each date of service for this measure. For example, If the first date of service (DOS) was completed on 12/1, the next date of service would have to be 12/15 (first DOS + 14 days) or later.**



# Health Center Data For Measurement Period January 1 to December 31, 2024



*For all patients, not just QIP denominator patients*



# Summary Data

## Well-Child Visits (15-30 Months of Life)

- Average: 59.8%
- Range: 19.0% to 86.2%
- Other notes: 15.8% of denominator patients had no well-child visits and 24.4% had a single well-child visit
- For the 2024 measurement period, there was no difference between the measure numerator with and without the 14-day rule application



# Monitoring Measure: Topical Fluoride for Children



# Topical Fluoride for Children

- Similar to the existing MCAS Quality Measure in Relevant named “Topical Fluoride for Children (Aligns with 2024 CMS Measure TFL-CH)”
- The MCAS measure has an age range of 1 to 20 years of age while the QIP measure looks at patients 1 to 4 years of age
- Neither the MCAS measure nor the QIP measure apply the “14-day” rule to the two visits





# Topical Fluoride for Children

- This is now a HEDIS measure (abbreviation TFC)
- Data element: Topical Fluoride Applications
- HEDIS Value Set Name: Application of Fluoride Varnish
- HEDIS Value Set OID: 2.16.840.1.113883.3.464.1004.2403
- Codes: 99188 (CPT) and D1206 (CDT)
- All health centers should make sure that the Relevant Data Element is enabled, joined to the Value Set and validated



# Topical Fluoride for Children

**Denominator** for all-patients version:

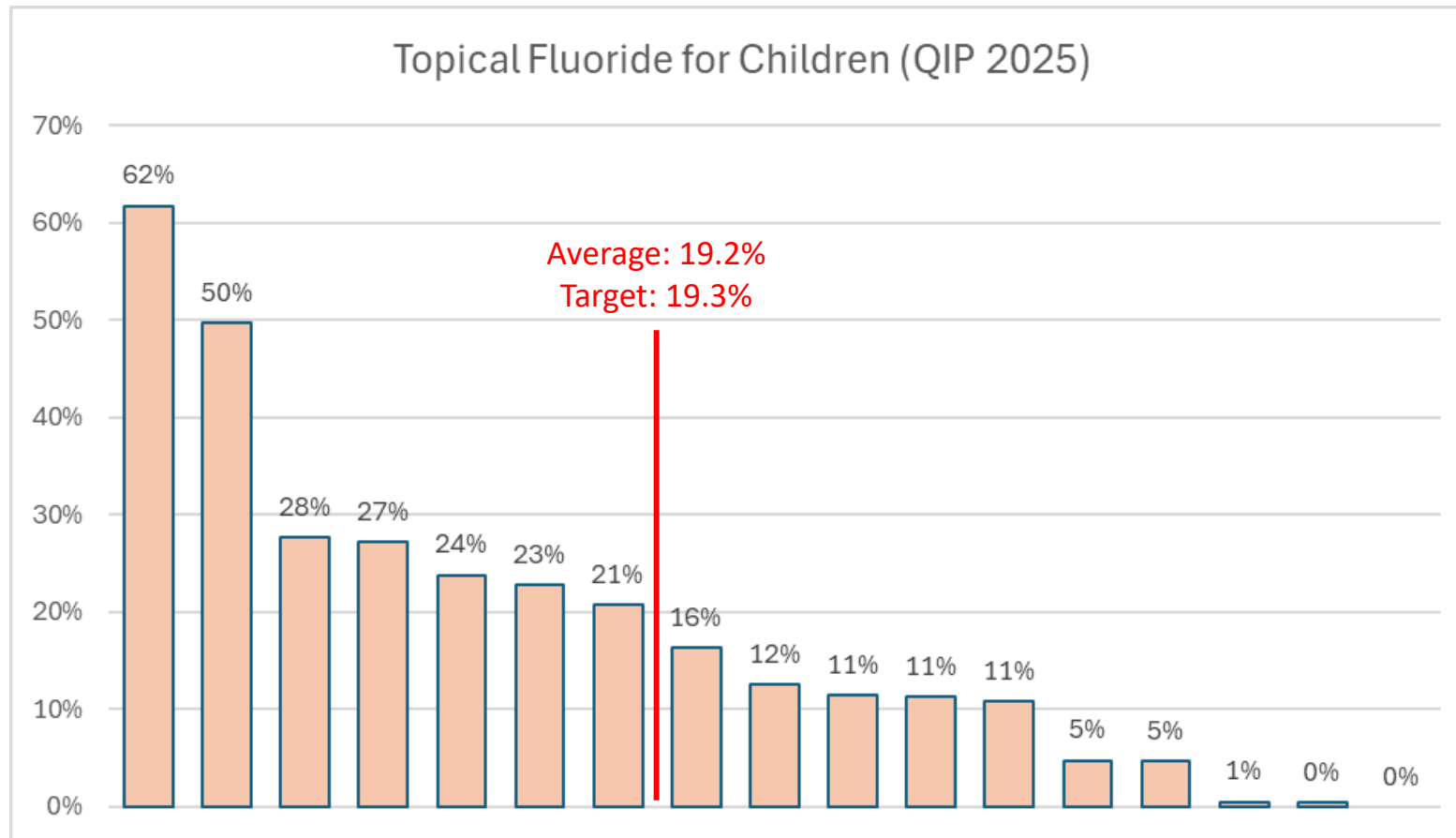
- Patients 1 to 4 years of age as of the last day of the measurement period
- At least one medical visit or dental visit in the measurement period

**Numerator:** Had two or more fluoride varnish applications during the measurement year, on different dates of service

**Exclusions:** Had hospice or deceased during the measurement year



# Health Center Data For Measurement Period January 1 to December 31, 2024



*For all patients, not just QIP denominator patients*



# Summary Data

All health centers for all patients

- Average: 19.2%
- Range: 0.0% to 61.8%

Other notes

- 54.2% of denominator patients had no varnish visits and 26.6% had a single varnish visit
- Of health centers with the fluoride varnish application Data Element already set-up, the average numerator is 15.5%



# Other QIP Measure Definition Changes



# No Detectable Measure Definition Differences for the Legacy QIP Measures

- Breast Cancer Screening (50 to 74 years of age)
- Cervical Cancer Screening
- Child and Adolescent Well-Care Visits
- Childhood Immunization Status - Combo 10
- Colorectal Cancer Screening
- Comprehensive Diabetes Management – HbA1c Good Control
- Comprehensive Diabetes Management – Retinal Eye Exam
- Controlling High Blood Pressure
- Lead Screening in Children
- Well-Child Visits in the First 15 Months of Life



# Change: Immunizations for Adolescents

- Meningococcal vaccine has an expanded age range
- Previous (2024 QM): vaccine given between 11 and 13 years of age
- Now (2025 QM): vaccine given between 10 and 13 years of age

Difference with the same measurement period (1/1/2024 to 12/31/2024) among Relevant / Aliados Health Centers

- Average: +0.226%
- Min: 0.000%
- Max: +0.833%



# Next Steps





# Copy of the 2025 QIP Measure Set

- Look for an e-mail from Aliados Health
- We will ask permission to add the 2025 QIP measures to your instance of Relevant within a specific date range
- Measures will be added but not enabled
- Health centers should make sure the Data Elements are established and prepare to validate the data
- This process will look different depending on how your health center handles Partnership patients



# 2025 QIP Measure Set Copied to Health Centers

Group 1: Health Centers participating in PHMI

- These health centers have Partnership member lists integrated into Relevant and have the QIP measure denominators uploaded monthly in a standard manner
- The 2025 QIP measures will be added and joined to the QIP denominator lists
- New 2025 PHMI reports will be added that use data from the appropriate measures
- Option to add 2025 QIP measures with all-patient denominators



# 2025 QIP Measure Set Copied to Health Centers

Group 2: Other Health Centers with Partnership data

- Non-PHMI health centers that have Partnership member lists integrated into Relevant and uploaded their QIP measure denominators monthly in a standard manner
- The 2025 QIP measures will be added and joined to the QIP denominator lists
- Option to add 2025 QIP measures with all-patient denominators



# 2025 QIP Measure Set Copied to Health Centers

Group 3: Health Centers without Partnership data

- 2025 QIP measures with all-patient denominators will be added



# Other Notes

- The all-patient QIP Quality Measures will be added to the Aliados Health instance, and you can copy any you are interested in at any time
- Also in the works for Partnership-integrated health centers: a reconciliation report to display more detailed data on the denominator of each measure with the QIP result, the EHR result, and ways to group or sort patients from each measure who should be recalled or should have their EHR data checked and sent to Partnership.



# Questions?

