

Quality Council 2025 Aligned Measure Set

Updated August 1, 2024

Background: The Aligned Measure Set is a set of 23 measures from which OHS requests insurers select measures for use in new value-based contracts. The Aligned Measure Set contains Core Measures and Menu Measures. **Core Measures** are those that OHS asks insurers use in all new value-based contracts. OHS has designated additional measures as **Menu Measures**. These measures are for optional use in new value-based contracts. Insurers are asked to restrict the quality measures they use in new value-based Advanced Network contracts to only those found in the Core and Menu Sets. OHS does not expect payers to amend existing contracts to align with these Core Measures, although it welcomes insurers willing to do so. For further guidance on how OHS recommends insurers and Advanced Networks implement the Aligned Measure Set, please see [OHS' Implementation Guidance document](#).

#	Measure Name	NQF		Source
Core Measure Set (7)				
Care Coordination (1)				
1	Plan All-cause Readmission	1768	NCQA	Claims
Acute & Chronic Care (2)				
2	Controlling High Blood Pressure	0018	NCQA	EHR
3	Glycemic Status Assessment for Patients with Diabetes (>9%)	0059	NCQA	EHR
Prevention (2)				
4	Child and Adolescent Well-care Visits	NA	NCQA	Claims
5	Prenatal and Postpartum Care¹	1517	NCQA	EHR
Behavioral Health (1)				
6	Follow-up After Emergency Department Visit for Mental Illness	3489	NCQA	Claims
Health Equity (1)				
7	Race, Ethnicity and Language Data Completeness²	NA	CT OHS	EHR
Menu Measure Set (16)				
Health Equity (1)				
1	Health Equity Measure³	NA	CT OHS	EHR

¹ OHS does not expect payers to use this measure in contracts with Advanced Networks that do not include obstetric providers.

² Specifications for this measure can be found here: <https://portal.ct.gov/ohs/pages/quality-council>

³ This measure was previously titled the *Race, Ethnicity and Language (REL) Stratification Measure*.

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AHRQ: Agency for Healthcare Research and Quality

AMA-PCPI: American Medical Association-convened Consortium for Performance Improvement

CMS: Centers for Medicare & Medicaid Services

CT DSS: Department of Social Services

IEHP: Inland Empire Health Plan

NCQA: National Committee for Quality Assurance

OHSU: Oregon Health & Science University

PQA: Pharmacy Quality Alliance

#	Measure Name	NQF		Source
Social Determinants of Health (1)				
2	Social Determinants of Health Screening⁴	NA	CT OHS	Survey
Consumer Engagement (1)				
3	PCMH CAHPS Survey	0005	AHRQ	Survey
Care Coordination (1)				
4	Transitions of Care⁵	NA	NCQA	EHR
Prevention (8)				
5	Breast Cancer Screening⁶	2372	NCQA	Claims
6	Cervical Cancer Screening	0032	NCQA	Claims
7	Chlamydia Screening in Women	0033	NCQA	Claims
8	Colorectal Cancer Screening	0034	NCQA	EHR
9	Developmental Screening in the First Three Years of Life	1448	OHSU	EHR
10	Immunizations for Adolescents (Combo 2)	1407	NCQA	Claims
11	Screening for Depression and Follow-up Plan⁷	0418	CMS	EHR
12	Well-Child Visits in the First 30 Months of Life	1392	NCQA	Claims
Acute & Chronic Care (3)				
13	Asthma Medication Ratio	1800	NCQA	Claims
14	Kidney Health Evaluation for Patients with Diabetes	NA	NCQA	EHR
15	Statin Therapy for Patients with Diabetes	NA	NCQA	Claims
Behavioral Health (1)				
16	Follow-up After Hospitalization for Mental Illness (7-Day)	0576	NCQA	Claims

⁴ Specifications for this measure can be found here: <https://portal.ct.gov/ohs/pages/quality-council>

⁵ This measure is specified as a Medicare-only measure but can be used in commercial and Medicaid contracts; however, not for reporting purposes.

⁶ NCQA expanded the denominator age range to 40-74 years of age for measurement year 2025. The expanded age range should not be used in contracts with benchmarks that were calculated based on the prior (50-74 years) age range.

⁷ OHS permits the use of NCQA's *Depression Screening and Follow-Up for Adolescents and Adults* for the purposes of aligning with the Aligned Measure Set.)

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