MEASURE SUMMARY CHIPRA Core Set Candidate Measures

- A. Control #: PHP-19a
- B. Measure Name: Evidence of BMI Percentile Assessment
- C. Measure Definition

a. Numerator:	Children in the denominator who had evidence of BMI documentation during the measurement year							
b. Denominator:	Children 2–17 years of age who had an outpatient visit with a PCP o OB/GYN during the measurement year							
D. Measure Type:	Process		Outcome	_ Structure	_ Efficiency			
E. Measure collected usi	ng:	EMR	CPOE	Other HIT	N/A _✓	NR		
VALIDITY								

- F. Evidence of measure validity submitted? ____ Yes ____ No
- G. Level of evidence supporting the measure (if submitted): (see Oxford University CEBM Levels of Evidence)

Oxford CEBM = 5 (Expert Consensus Opinion; No trials of screening programs to identify and treat overweight in children and adolescents have been reported. Limited research is available on effective, generalizable interventions for overweight children and adolescents that can be conducted in primary care or to which primary care can make referrals. Most research has investigated intensive behavioral counseling interventions conducted by specialists with repeated contacts over 6 to 12 months, many using family-based comprehensive behavioral treatments. No current research is reported in children aged two-five. The number of studies addressing adolescents is small, but increasing. Overall, current trials are limited due to small--often-selective--samples; non-comparable interventions between trials; short-term (6 to 24 months) follow-up; reporting of overweight outcomes only with minimal reporting of health outcomes; and failing to report intention-to-treat analyses. While monitoring growth and development in children and adolescents through BMI documentation at visits is prudent, care should be taken not to unnecessarily label children and adolescents as overweight or at risk for overweight until more is known about BMI as a risk factor, and effective interventions are available).

H. USPSTF Grade if applicable:

FE	ASIBILITY
I.	Measure Specifications Submitted? <u>✓</u> Yes <u>No</u> Yes, but insufficient detail provided
-	Data Source: ✓ Admin ✓ MR NR
K.	Evidence of measure reliability submitted? Yes No
L.	List of <u>entity types</u> currently <u>using measure</u> :
	State Medicaid Programs
IM.	PORTANCE
м	Addresses area of care mandated in legislation?

\checkmark	Yes (specify): Prevention and health Promotion: General screening		No
--------------	---	--	----

N. Documented variation in performance (by race/ethnicity, language spoken, insurance type, etc)?

Completed by:

<u>x</u> Yes No ✓ NR

CONFIDENTIAL, PRELIMINARY FIRST YEAR REPORTING DATA: National mean (Medicaid): 21.29%; 10th percentile 0.10%; 90th percentile 47.45%.

O. Measure used/data are collected in <u>racial/ethnic populations</u> other than non-Hispanic white?

____ Yes ____ No _✓_ NR