

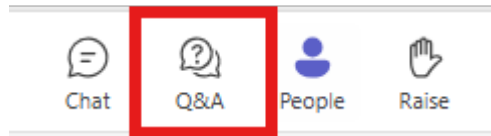
Child and Adult Core Sets Annual Review Workgroup

2029 Annual Review Orientation Meeting

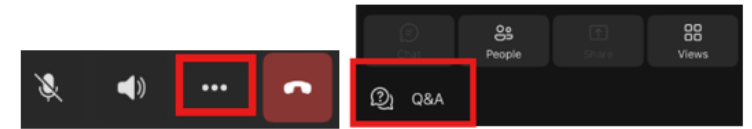
August 19, 2026

Technical Instructions (1/2)

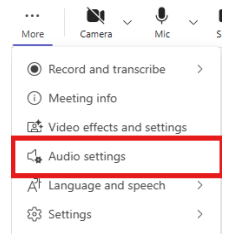
- If you are experiencing technical issues during the webinar, please send a message through the **Q&A** function. To access the Q&A, click the Q&A button in the meeting controls at the top of your screen.



On the mobile app:

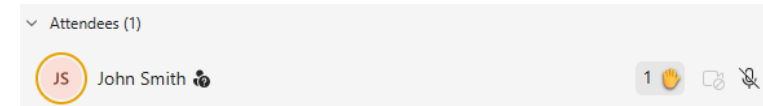
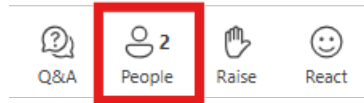
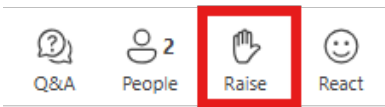


- If you are having issues speaking during Workgroup or public comments, ensure you are not also muted on your device, headset, or phone. Participants are recommended to connect with computer audio and use headphones to reduce echo.
 - Audio settings can be accessed by selecting the **More** menu and choosing **Audio settings**.
 - Call-in only users cannot make comments. Please ensure your audio is associated with your name in the platform. Do not connect with computer and phone audio simultaneously.
 - Be sure to use the latest version of Teams or a supported browser.
 - Participants are encouraged to join 10-15 minutes early to test their speakers and microphone

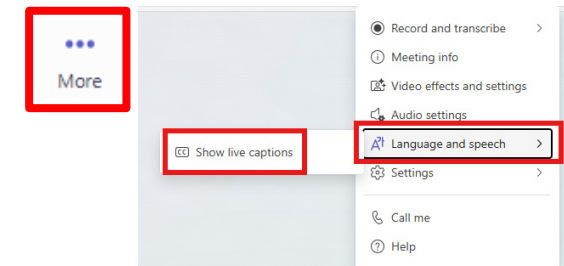


Technical Instructions (2/2)

- During the webinar, there will be opportunities for Workgroup member comments or public comment.
- To make a comment, please use the **raise hand** feature. A hand icon will appear next to your name in the People panel.*



- Please wait for a verbal cue to unmute yourself. Participants must select the microphone button after the host enables their audio. Please lower your hand when you have finished speaking.
- Please note that the chat function is disabled for this webinar. All questions should be submitted using the **Q&A** function.
- To enable closed captioning, select **More ...** from the meeting controls and choose **Language and Speech** and select **Show live captions**.



* The appearance and position of controls may differ based on device and window size. If controls do not appear, refresh the browser or leave and rejoin the event.

Welcome, Introductions, and Workgroup Objectives

Meeting Objectives

- **Introduce the 2029 Child and Adult Core Sets Annual Review Workgroup.**
 - CMS is reviewing the recommendations of the 2028 Workgroup and plans to release the 2028 Core Sets by the end of this year.
 - This year's review will:
 - Focus on updates to the 2029 Child and Adult Core Sets
 - Cover any Core Set measure changes that were announced after the 2028 review concluded
- **Describe the charge, timeline, and vision for the 2029 Child and Adult Core Sets Annual Review.**
- **Present the process for suggesting measures for addition to or removal from the 2029 Child and Adult Core Sets.**
- **Provide opportunity for questions.**

Mathematica Core Sets Review Team

- **Rosemary Borck, Principal Researcher**
- **Maria Dobinick, Researcher**
- **Chrissy Fiorentini, Researcher**
- **Deb Haimowitz, Advisory Services Analyst**
- **Denesha Lafontant, Advisory Services Analyst**
- **Patricia Rowan, Principal Researcher**
- **Jess Saddler, Managing Consultant**
- **Alli Steiner, Senior Researcher**
- **Ben Szeto, Research Associate**

2029 Core Sets Annual Review Workgroup (1/3)

Voting Members

Co-Chair: Kim Elliott , PhD, MA, CPHQ, CHCA	Health Services Advisory Group
Co-Chair: Sarah Tomlinson , DDS, RDH <i>Nominated by the American Dental Association</i>	North Carolina Department of Health and Human Services
Dawn Alley , PhD	IMPACT Care
Erin Alston , MS, MPH <i>Nominated by the American College of Obstetricians and Gynecologists</i>	American College of Obstetricians and Gynecologists
Stacey Bartell , MD <i>Nominated by the American Academy of Family Physicians</i>	American Academy of Family Physicians
Lee Savio Beers , MD, FAAP <i>Nominated by the American Academy of Pediatrics</i>	American Academy of Pediatrics
Laura Boutwell , DVM, MPH <i>Nominated by the National Association of Medicaid Directors</i>	Virginia Department of Medical Assistance Services
Matt Brannon , MBA <i>Nominated by the National Association of Medicaid Directors</i>	West Virginia Bureau for Public Health
Joanne Bush , MFSC <i>Nominated by the National Association of Medicaid Directors</i>	Iowa Department of Human Services
Jessica Harley , MS <i>Nominated by the Association for Community Affiliated Plans</i>	Community Health Choice

2029 Core Sets Annual Review Workgroup (2/3)

Voting Members

Richard Holaday , MHA <i>Nominated by the National Association of Medicaid Directors</i>	Delaware Division of Medicaid and Medical Assistance
Jeff Huebner , MD, FAAFP	Wisconsin Department of Health Services
David Kelley , MD, MPA	Pennsylvania Department of Human Services
Rachel La Croix , PhD, PMP <i>Nominated by the National Association of Medicaid Directors</i>	Florida Agency for Health Care Administration
Chimene Liburd , MD, MBA, FACP, CPE, CPC <i>Nominated by the Medicaid Medical Directors Network</i>	The District of Columbia Health Care Finance Agency
Paloma Luisi , MPH	New York State Department of Health
Christina Marea , PhD, MA, MSN, FACNM <i>Nominated by the American College of Nurse Midwives</i>	Georgetown University
* Erin O'Rourke	AHIP
Angela Parker , RHIT <i>Nominated by the National Association of Medicaid Directors</i>	Kentucky Department of Medicaid Services

* New Workgroup member

2029 Core Sets Annual Review Workgroup (3/3)

Voting Members

* Laura Pennington, MHL Nominated by the Medicaid Medical Directors Network	Washington State Health Care Authority
Nicole Pratt, MAT <i>Nominated by the National Center for Children's Vision and Eye Health</i>	SPAN Parent Advocacy Network
* Robert Schloesser, MD <i>Nominated by the American Psychiatric Association</i>	Sheppard Pratt
Sural Shah, MD, MPH	California Department of Health Care Services
Sara Toomey, MD, MPhil, MSc, MPH	Boston Children's Hospital
Ann Zerr, MD	Indiana Family and Social Services Administration
Bonnie Zima, MD, MPH <i>Nominated by the American Academy of Child and Adolescent Psychiatry and American Psychiatric Association</i>	UCLA Mental Health Informatics & Data Science (MINDS) Hub
David Zona, MBA, PMP, CHCA	IPro

* New Workgroup member

2029 Core Sets Annual Review Workgroup: Federal Liaisons

Federal Liaisons (Non-voting)

Agency for Healthcare Research and Quality

Center for Clinical Standards and Quality at CMS

Centers for Disease Control and Prevention

Health Resources and Services Administration

Office of the Assistant Secretary for Planning and Evaluation

Office of Disease Prevention and Health Promotion

Substance Abuse and Mental Health Services Administration

US Department of Veteran Affairs

Disclosure of Interest

- **All Workgroup members are required to submit a Disclosure of Interest form.**
 - **Mathematica requires that Workgroup participants disclose any interests, relationships, or circumstances over the past 4 years that could give rise to a potential conflict of interest or the appearance of a conflict of interest related to the current Child and Adult Core Sets measures or measures reviewed during the Workgroup process.**
- **Workgroup members will review and update their Disclosure of Interest form before the voting meeting.**
- **Members deemed to have an interest in a measure recommended for consideration will be recused from voting on that measure.**
- **During the voting meeting, members will be asked to disclose any interests, though such disclosure may not indicate that a conflict exists.**

2029 Core Sets Annual Review Workgroup Charge

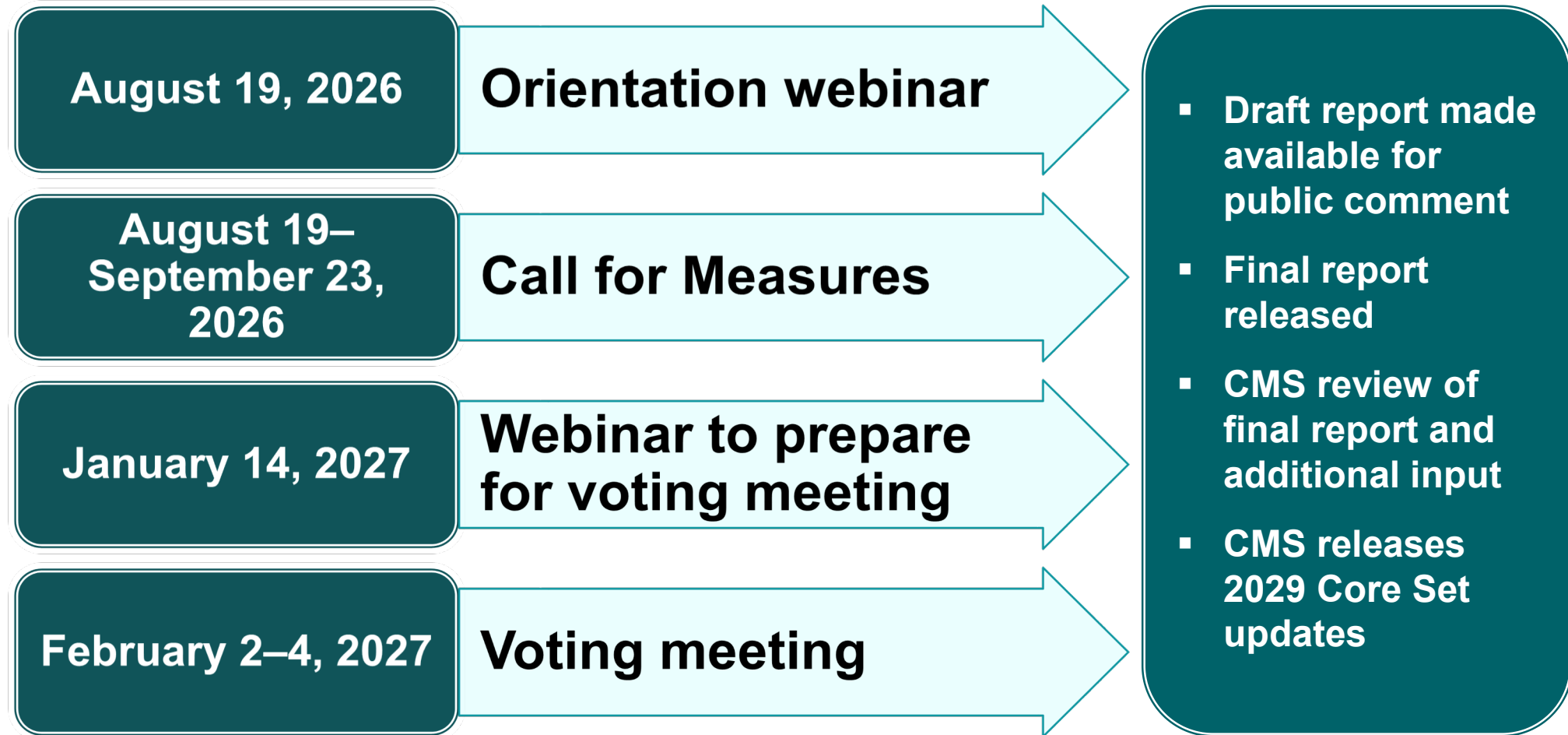
The 2029 Child and Adult Core Sets Annual Review Workgroup is charged with assessing the existing Core Sets and recommending measures for removal or addition to strengthen and improve the Core Sets for Medicaid and CHIP.

The Workgroup should recommend adding measures that are actionable, feasible, and appropriate for state-level reporting, to ensure the measures can meaningfully drive improvement in health care delivery and outcomes in Medicaid and CHIP.

The Workgroup should recommend removing measures that do not provide states and CMS with meaningful and actionable information about quality of care.

Given mandatory reporting requirements, the Workgroup should focus, in particular, on the feasibility of state reporting by all states for all Medicaid and CHIP populations.

2029 Core Sets Annual Review Workgroup Milestones



CMS Remarks
Vishal Arora, M.D.
Senior Advisor
Centers for Medicare & Medicaid Services

CMS Vision for the 2029 Child and Adult Core Sets Annual Review

CMS Goals for the Core Sets

- **Increase the number of states meeting Core Set mandatory reporting requirements through technical assistance and outreach**
- **Improve the quality (completeness and accuracy) of reported data**
- **Simplify data collection and reporting to reduce burden on states**
- **Support states in using Core Set measures to improve health care quality and health outcomes**
- **Improve accessibility and usability of data through advanced data visualization techniques**
- **Provide technical assistance to facilitate implementation of digital quality measures, and to utilize sources of clinical data to assess health care quality**

Priority Gaps in the Child and Adult Core Sets

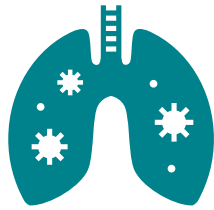
- As indicated in the actionability criteria, measures suggested for addition should fill a priority gap in the Core Sets and align with national health care quality priorities.
- The 2028 Workgroup identified 32 priority gap areas in the Core Sets:
 - 25 gap areas that fall within an existing Core Sets domain (e.g., Behavioral Health Care, Maternal and Perinatal Health)
 - 7 cross-cutting gap areas
- The full list of priority gap areas identified by the 2028 Workgroup is available in the Call for Measures Materials packet on our website: <https://www.mathematica.org/features/maccoresetreview>.

CMS Priorities

- **CMS aims to align quality reporting and value-based programs with strategic priorities, including the Investing in Health Outcomes Pledge and the Make America Healthy Again (MAHA) initiative.**
- **CMS encourages the Workgroup to identify opportunities to reduce reporting burden by:**
 - **Recommending removal of measures that offer limited value for improvement**
 - **Recommending outcomes-oriented measures to replace process measures where available**
 - **Aligning measures across programs**

Make America Healthy Again (MAHA) Priorities

- The MAHA initiative emphasizes improving health outcomes in the areas of:



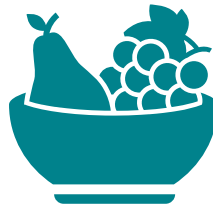
Disease Prevention
(primary, secondary, tertiary)



Chronic Disease Management



Physical Activity



Nutrition



Wellness & Behavioral Health

Investing in Health Outcomes Pledge

We, the undersigned stakeholders in the Medicaid and CHIP ecosystem, commit to aligning our quality improvement efforts to deliver better health outcomes for the nearly 80 million individuals enrolled in Medicaid and CHIP. We recognize that the scale and mission of Medicaid and CHIP demand a quality system that is focused, evidence-based, and accountable. We agree to advance the following set of principles to improve quality in Medicaid and CHIP:

- Prioritize outcomes over process today and in the future: Emphasize health outcomes focused on primary prevention, chronic disease management, and behavioral health, starting with existing measures today and ensuring outcomes-oriented measures for future development.**
- Rationalize measure inventories: Converge on a set of measures that reduces regulatory burden without sacrificing accountability.**
- Modernize the quality measurement enterprise towards digital: Adopt digital quality measurement using near-real-time data as the default approach, replacing administrative claims and chart abstraction wherever feasible today, recognizing foundational tech investments will be required over time.**
- Align financial accountability to outcomes measures: Ensure that payment meaningfully rewards performance on health outcomes-oriented measures.**

CMS Remarks

Gigi Raney

**Technical Director, Health Outcomes, Measurement, and
Evaluation Team, Division of Quality and Health Outcomes
Center for Medicaid and CHIP Services**

Background on the Child and Adult Core Sets

What are the Medicaid & CHIP Child and Adult Core Sets?

- **Quality reporting by states on consistent metrics across these domains:**

Primary Care Access and Preventive Care	Behavioral Health Care
Maternal and Perinatal Health	Dental and Oral Health Services
Care of Acute and Chronic Conditions	Experience of Care

- **2027 Child and Adult Core Sets:¹**

- **2027 Child Core Set includes 24 mandatory measures**

- In addition, 2 provisional measures and 3 utilization measures are available for voluntary reporting.²

- **2027 Adult Core Set includes 33 measures (9 mandatory and 24 voluntary)**

- In addition, 2 provisional measures and 1 utilization measure are available for voluntary reporting.²

¹ The 2027 measure lists are available at <https://www.medicaid.gov/medicaid/quality-of-care/downloads/2027-child-core-set.pdf> and <https://www.medicaid.gov/medicaid/quality-of-care/downloads/2027-adult-core-set.pdf>.

² Provisional and utilization measures are not considered part of the Child and Adult Core Sets. Reporting of utilization and provisional measures is voluntary but encouraged. CMS expects provisional measures to be added to the Core Sets in future years.

Child and Adult Core Set Reporting Years

**Latest data reported by
states; public data
coming soon!**



**Latest year for which
CMS has released
measure lists**



**Focus of current
review cycle**



Core Sets Reporting Year	Period of Services Reflected in the Data*	Deadline for State Reporting	Approximate Timeframe for Public Data Release
2025	CY 2024	12/31/2025	Fall 2026
2026	CY 2025	12/31/2026	Fall 2027
2027	CY 2026	12/31/2027	Fall 2028
2028	CY 2027	12/31/2028	Fall 2029
2029	CY 2028	12/31/2029	Fall 2030

CY = Calendar year.

* For most Core Set measures, the data states report to CMS reflect services provided in the previous calendar year. The specific measurement periods for each measure are included in the reporting resources that are updated annually for the [Child](#) and [Adult](#) Core Sets.

Mandatory Core Set Reporting Requirements for States

- **Report all Child Core Set measures and the behavioral health measures on the Adult Core Set.**
- **Adhere to the reporting guidance in the Core Set resource manuals and technical assistance briefs issued by CMS.**
- **Include all measure-eligible Medicaid and CHIP beneficiaries for mandatory measures. However, the following populations are exempt from mandatory reporting for 2026 and 2027:**
 - **Beneficiaries who have other insurance coverage as a primary payer before Medicaid or CHIP, including individuals dually eligible for Medicare and Medicaid; and**
 - **Individuals whose Medicaid or CHIP coverage is limited to payment of liable third-party coverage premiums and/or cost sharing.**
- **Stratify all eligible mandatory measures by the required stratification categories included in the annual Core Set guidance.**

Potential Changes to the 2028 Child and Adult Core Sets: Recap of the 2028 Annual Review

- **The Workgroup recommended four measures for addition to the 2028 Core Sets:**
 - **Follow-Up After Acute and Urgent Care Visits for Asthma**
 - **Tobacco Use Screening and Cessation Intervention**
 - **Social Need Screening and Intervention**
 - **Adults' Access to Preventive/Ambulatory Health Services**
- **The Workgroup did not recommend removing any measures from the 2028 Core Sets.**

Preparing for the Public Call for Measures for the 2029 Child and Adult Core Sets

Call for Measures: 2029 Child and Adult Core Sets Annual Review

- To focus the Call for Measures for the 2029 Child and Adult Core Sets on measures that are a good fit for the Core Sets, Mathematica has identified criteria for addition and removal and sorted them into categories.
- To be considered for addition to the 2029 Core Sets, measures must meet all criteria in the minimum technical feasibility and appropriateness category.
- To be considered for removal from the 2029 Core Sets, measures must meet at least one criterion in any category.

Criteria for Suggesting Measures for Addition (1/2)

- All minimum technical feasibility and appropriateness criteria must be met for a measure to be considered by the Workgroup during the voting meeting.

Minimum Technical Feasibility and Appropriateness

- | |
|---|
| A1. The measure must be fully developed and have detailed technical specifications that enable production of the measure at the state level (e.g., numerator, denominator, and value sets). (Specifications must be provided as part of the submission.) |
| A2. The measure must have been tested in state Medicaid and/or CHIP programs or be in use by one or more state Medicaid and/or CHIP programs according to measure specifications. (Documentation is required as part of the submission.) |
| A3. An available data source or validated survey instrument exists that contains all the data elements necessary to calculate the measure, including an identifier for Medicaid and CHIP beneficiaries (or the ability to link to an identifier). |
| A4. The specifications and data source must allow for consistent calculations across states (e.g., coding and data completeness). |
| A5. The measure aligns with current clinical guidance and/or positive health outcomes. |
| A6. The measure must include technical specifications (including code sets) that are provided free of charge for state use in the Core Sets. |

Criteria for Suggesting Measures for Addition (2/2)

Actionability

- B1.** The measure improves upon or enhances an existing measure on the Core Sets and is suggested as a replacement for that measure.
- B2.** The measure would fill a priority gap in the Core Sets and aligns with national health care quality priorities.
- B3.** The measure can be used to assess state progress in improving health care delivery and outcomes in Medicaid and CHIP (e.g., the measure has room for improvement, performance is trendable, and improvement can be directly influenced by Medicaid and CHIP programs or providers).
- B4.** The measure is able to be stratified by the required stratification categories included in the annual Core Sets guidance for the Medicaid and CHIP population. Considerations could include adequate sample and population sizes and available data in the required data source(s).

Other Considerations

- C1.** The prevalence of the condition or outcome being measured is sufficient to produce reliable and meaningful state-level results, taking into account Medicaid and CHIP population sizes and demographics.
- C2.** The measure and measure specifications are aligned with those used in other CMS programs, where possible (e.g., Core Quality Measures Collaborative Core Sets, Medicare Promoting Interoperability Program, Merit-Based Incentive Payment System, Medicaid and CHIP Quality Rating System, Medicare Advantage Star Ratings, and/or Medicare Shared Savings Program).
- C3.** Adding the measure to the Core Sets does not result in substantial additional data collection burden for providers or Medicaid and CHIP beneficiaries.
- C4.** The code sets and codes specified in the measure must be in use by Medicaid and CHIP programs or otherwise be readily available to Medicaid and CHIP programs to support calculation of the measure.

Criteria for Suggesting Measures for Removal (1/2)

Technical Feasibility

- A1.** The measure is being retired by the measure steward and will no longer be updated or maintained.
- A2.** The measure is not fully developed and does not have detailed technical measure specifications, preventing production of the measure at the state level (e.g., numerator, denominator, and value sets).
- A3.** The majority of states report significant challenges in accessing an available data source that contains all the data elements necessary to calculate the measure, including an identifier for Medicaid and CHIP beneficiaries (or the ability to link to an identifier).
- A4.** The specifications and data source do not allow for consistent calculations across states (e.g., there is documented variation in coding or data completeness across states).

Actionability

- B1.** Another measure is recommended for replacement which is (1) more broadly applicable (across settings, populations, or conditions) for the topic, and/or (2) more proximal in time to desired beneficiary outcomes, and/or (3) more strongly associated with desired beneficiary outcomes. (Note that the replacement measure must also meet the minimum technical feasibility criteria to be considered by the Workgroup.)
- B2.** Measure performance for all populations is so high and unvarying that meaningful distinctions in improvements or performance can no longer be made.
- B3.** Improvement on the measure is outside the direct influence of Medicaid and CHIP programs or providers.
- B4.** The measure no longer aligns with current clinical guidance and/or positive health outcomes.
- B5.** The measure is not able to be stratified by all the required stratification categories included in the annual Core Sets guidance. Considerations could include lack of adequate sample and population sizes or lack of available data in the required data source(s).

Criteria for Suggesting Measures for Removal (2/2)

Other Considerations

- C1.** The prevalence of the condition or outcome being measured is not sufficient to produce reliable and meaningful state-level results, taking into account Medicaid and CHIP population sizes and demographics.
- C2.** The measure and measure specifications are not aligned with those used in other CMS programs (e.g., Core Quality Measures Collaborative Core Sets, Medicare Promoting Interoperability Program, Merit-Based Incentive Payment System, Medicaid and CHIP Quality Rating System, Medicare Advantage Star Ratings, and/or Medicare Shared Savings Program).
- C3.** Including the measure on the Core Sets results in substantial additional data collection burden for providers or Medicaid and CHIP beneficiaries.

Process and Resources for Suggesting Measures for Addition or Removal

Suggesting Measures for Addition or Removal

- For the 2029 review cycle Workgroup members, federal liaisons, and members of the public are invited to suggest measures to add to or remove from the Child and Adult Core Sets.
- Use the links below to suggest a measure for addition or removal.
 - Form to Suggest a Measure for Addition:
<https://mathematica.questionprogov.com/2029Additions>
 - Form to Suggest a Measure for Removal:
<https://mathematica.questionprogov.com/2029Removals>
- All measure submission forms must be submitted by 8:00 PM ET on Wednesday, September 23, 2026.
- The submission forms and additional resources are also available at:
<https://www.mathematica.org/features/maccoresetreview>.

Call for Measures Resources

- The 2029 Resources tab on the [website](#) contains helpful documents including: Call for Measures Materials packet, Measure Submission Tips & FAQs, background resources on the Child and Adult Core Sets, and Word previews of the measure submission forms.

2029 Resources

 FILTER

Hide

☐ All Resources (2)

☐ Roster (1)

☒ Call for Measures (1)

1 result(s) for *Call for Measures* are listed below

Select View  

2029 Background Resources on the Child and Adult Core Sets

DOWNLOAD 

 July 14, 2026

2029 Measure Submission Form: Measure(s) Suggested for Addition to the Child and/or Adult Core Sets



2029 Measure Submission Form: Measure(s) Suggested for Addition to the Child and/or Adult Core Sets

Instructions

- Only measures that meet the minimum technical feasibility and appropriateness criteria for addition to the 2029 Child and Adult Core Sets will be considered.** The criteria are available in the Call for Measures Materials packet posted at <https://mathematica.org/-/media/internet/features/2026/child-and-adult-core-set/call-for-measures-materials-packet.pdf>.
- A response is required for all questions that have an asterisk *.
- All questions that have a blank text box underneath the question will accept free text responses, with character limits. Please spell out all abbreviations and define special terms at their first occurrence.
- For check box fields, note whether you are instructed to “select one” or “select all that apply.” Please click on your desired response option to select it. For “select all that apply” questions, you can click on the checkbox to remove your selection. To change your response to a “select one” question, click on a different response option.
- Note that if you are suggesting a new measure to replace an existing measure, you do not need to submit a separate measure removal form. Submit your rationale for the measure substitution using only the additions form.
- Please include links to supporting documentation where relevant. If links are not available, you may also submit supporting documentation as an attachment via email to MACCoreSetReview@mathematica-mpr.com. If submitting an attachment, the file name should indicate the related question number in the form.
- Send any questions to MACCoreSetReview@mathematica-mpr.com with the subject line “Public Call for Measures.”

Start[Save & Continue Later](#)

General Measure Submission Tips

- **Measure submission forms are the foundation for the Measure Information Sheets that Workgroup members review to prepare for the voting meeting.**
 - Provide evidence to support your measure suggestion, including citations.
 - If the Workgroup has considered the measure in the last five years, explain why it should be reconsidered.
 - For measures suggested for addition, address the minimum technical feasibility and appropriateness criteria.
- **If your proposed measure is similar to an existing Core Set measure, consider suggesting the existing measure for removal.**
- **If you are suggesting a new measure to replace an existing Core Set measure, submit your rationale using the additions form only.**
- **Use the Word previews of the measure submission forms to ensure that you have all the required information.**

Measure Submission FAQ

- **Will all measures submitted be considered by the Workgroup during the voting meeting?**
 - No. Measures may not be discussed if the submission form is incomplete, lacks sufficient detail, or if the measure was previously discussed without new justification or evidence to support reconsideration.
 - Measures suggested for addition must meet all minimum technical feasibility and appropriateness criteria to be considered by the Workgroup. In past cycles, the most common reason a measure was not discussed was lack of testing in Medicaid or CHIP and absence of use by at least one state program.
- **What do you mean by “testing in state Medicaid and/or CHIP programs”?**
 - To meet minimum technical feasibility and appropriateness requirements, measures must have been field tested in or be currently in use by state Medicaid and CHIP programs.
 - Field testing—or beta testing—occurs after the development of complete specifications and is designed to test implementation and usability in the target population (in this case, state Medicaid and CHIP programs).
- **What qualifies as “state use” of a measure?**
 - The measure must be in current use, *according to technical specifications*, by at least one state Medicaid or CHIP program.
 - If a state has adapted an existing quality measure, this does NOT qualify as state use of the measure.

See the “Measure Submission Tips & FAQ” document in the 2029 Resources tab of <https://www.mathematica.org/features/maccoresetreview> for more questions and answers.

Co-Chair Remarks

Kim Elliott

Health Services Advisory Group

Sarah Tomlinson

North Carolina Department of Health and Human Services

Questions from Workgroup Members and the Public

Next Steps and Resources

Next Steps

- Workgroup members, federal liaisons, and members of the public are invited to suggest measures to add to or remove from the Child and Adult Core Sets.
- Measure suggestion forms must be received by Wednesday, September 23, 2026 at 8:00 PM ET.
- The meeting to prepare for the voting meeting is planned for January 14, 2027, 2:00–3:00 PM ET via webinar.
- The voting meeting is planned for February 2–4, 2027, 11:00 AM–4:30 PM ET via webinar.*
- Registration information will be available at <https://www.mathematica.org/features/maccoresetreview>.

* The dates and times for the voting meeting are dependent on the number of measures to be reviewed.

For More Information

- Information on the Child Core Set is available at <https://www.medicaid.gov/medicaid/quality-of-care/performance-measurement/child-core-set/index.html>.
- Information on the Adult Core Set is available at <https://www.medicaid.gov/medicaid/quality-of-care/performance-measurement/adult-core-set/index.html>.
- Information on the Child and Adult Core Sets Annual Review is available at <https://www.mathematica.org/features/maccoresetreview>.

Questions

If you have questions about the 2029 Child and Adult Core Sets Annual Review, please email the Mathematica Core Sets Review Team at: MACCoreSetReview@mathematica-mpr.com.

THANK YOU FOR PARTICIPATING!