

2024 CHILD AND ADULT CORE SET ANNUAL REVIEW WORKGROUP NOMINATION FORM

Thank you for your interest in submitting a nomination for the 2024 Child and Adult Core Set Annual Review Workgroup. Please submit this nomination form, along with a resume or curriculum vitae to MACCoreSetReview@mathematica-mpr.com.

Nominee information

First and last name	
Title	
Organization	
State	Phone number
Email address	

Nominator information (if different from above)

First and last name	
Title	
Organization	
State	Phone number
Email address	

I acknowledge that the nominee has been contacted and is willing to participate.

Areas of expertise (select all that apply)

Subject matter expertise

- | | |
|--|---|
| <ul style="list-style-type: none"> <input type="checkbox"/> Primary care access and preventive care <input type="checkbox"/> Maternal and perinatal health <input type="checkbox"/> Acute health care conditions <input type="checkbox"/> Chronic health care conditions <input type="checkbox"/> Mental health <input type="checkbox"/> Substance use <input type="checkbox"/> Dental and oral health <input type="checkbox"/> Experience of care | <ul style="list-style-type: none"> <input type="checkbox"/> Long-term services and supports <input type="checkbox"/> Patient safety <input type="checkbox"/> Disability <input type="checkbox"/> Health equity and health disparities <input type="checkbox"/> Social determinants of health <input type="checkbox"/> Children with special health care needs <input type="checkbox"/> Medicare and Medicaid dually eligible individuals <input type="checkbox"/> Other (specify) _____ |
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Beneficiary age groups

- Children and adolescents
- Adults
- Older adults

Methods and data sources

- Medicaid and CHIP data sources (such as claims, electronic health records, clinical registries, surveys, other)
- Data linkage (such as linking Medicaid claims and vital records, Medicaid and Medicare claims, clinical registries, or immunization information systems)
- Digital/electronic quality measures
- Collection and reporting of quality measures by states
- Use of quality measures for quality improvement
- Advancement of evidence-based measures of health care
- Measure development
- Measure testing and/or refinement
- Measure stratification by race, ethnicity, language, disability, and/or geography
- Other (specify) _____

Nominee affiliations (select all that apply)

Organization or individual affiliated with or representing:

- State Medicaid or CHIP agencies
- Medicaid and CHIP beneficiaries
- People with disabilities
- People with chronic conditions
- Physicians, dentists, or other health care providers
- Hospitals and health systems
- Purchasers of health care
- Other (specify) _____

Brief description of nominee interest, knowledge, and experience

Please describe why you are interested in participating in the 2024 Child and Adult Core Set Annual Review workgroup and the knowledge or experience you will contribute (200 words max).

Disclosure of interest*

Please disclose any involvement as a measure steward or measure developer in the past 3 years, particularly as it relates to the measures currently on the [Child](#) and [Adult](#) Core Sets.

I agree to submit a Disclosure of Interest form upon selection.**

Availability to participate*

I am available to participate in the following meetings:

- December 14, 2022: 2-3 pm ET (via webinar)
- April 4, 2023: 2-3 pm ET (via webinar)
- April 25-27, 2023: 11 am-5 pm ET (via webinar)

* If the form is submitted by a nominator, we will ask the nominee to attest to the disclosure of interest and the availability to participate upon selection.

** Nominees with conflicts of interest will be asked not to participate in discussions or recommendations for which they have a personal financial interest.

Please submit with this form your resume or curriculum vitae including relevant experience and publications to MACCoreSetReview@mathematica-mpr.com.