



2025 Child-Level Metric Focused on
Young Children Receiving Social-Emotional Issue-Focused Intervention/Treatment Services

Background: In 2019, the [Health Aspects of Kindergarten Readiness work group](#), convened by OHA and the Children’s Institute, recommended a multi-measurement strategy to enhance health care services for young children and ensure their readiness for kindergarten. This recommendation included metrics addressing the three domains of care that Coordinated Care Organizations (CCO) receive a global budget for in order to ensure a network of services for their Medicaid members: **physical**, **oral** and **behavioral health care**. Metrics related to **well-child visits for children 3-6 (physical care)** and **preventive oral services for children 1-5 (oral care)** have been included in the CCO Incentive Metric set since 2020.

Social emotional health is the developing capacity of a child to form close and secure relationships with their primary caregivers and other adults and peers; to experience, manage, and express a full range of emotions; and to explore the environment and learn, all in the context of family, community, and culture. **The System-Level Social Emotional Health Metric** was in the CCO Incentive Metric set from 2022 through this year (2024). This system-level metric was focused on driving improvements in CCO-covered social-emotional services for children from birth to age five and their families, with the ultimate goal of achieving equitable access to services that support social-emotional health and are the best match for their needs.

Starting in 2025, the social-emotional health metric becomes a Child-Level metric, specifically focused on
Young Children Receiving Social-Emotional Issue-Focused Intervention/Treatment Services.

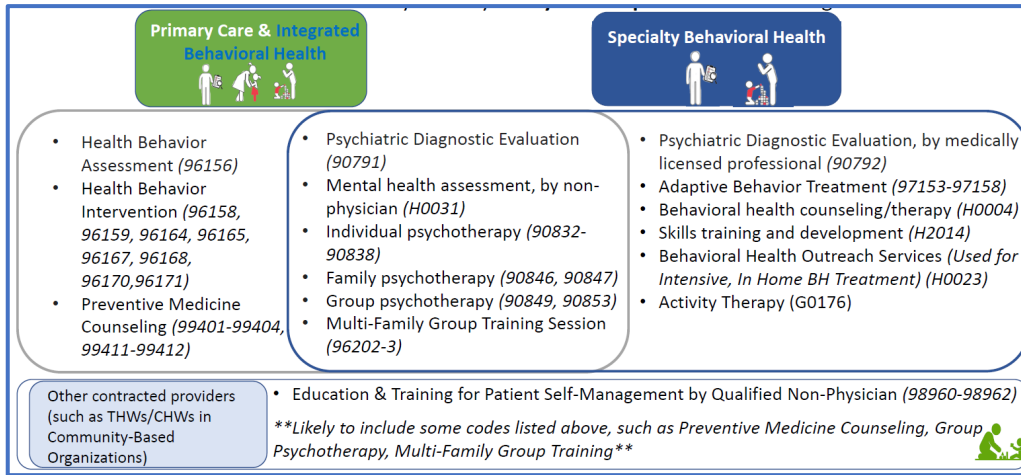
This metric will measure and incentivize improvements specifically focused on a breadth of services (from brief interventions to therapeutic services) for young children with identified social-emotional health issues. These issue-focused intervention services can be provided in an array of settings that the CCO contracts with to fulfill their role of [providing recommended health care and addressing factors identified as part of EPSDT recommended surveillance and screenings](#). The vision for the Social-Emotional Interventions for 1-5 quality metric is to transform the behavioral health system for young children, by enhancing services provided in the variety of settings that can provided evidence-based services addressing social-emotional health issues.

Metric Properties (Specifications can be found [here](#)):

Numerator: Children who received issue focused intervention/treatment services that were billed to the Coordinated Care Organization	X 100 = % of Children
Denominator: Children ages 1-5 who are covered by Oregon Health Plan and enrolled in the Coordinated Care Organizations for 12 months, allowing for a 45-day break	



Specific Claims Included in the Metric.



Please note: There are no specific diagnostic pairing or provider types required.

Within the **behavioral health setting**, this metric is aligned with evidence-based services that can be provided for young children.

Within the primary care setting, given that well-child visits are already incentivized in the CCO metric set, this metric is not intended to capture the quality of care provided in well-child care. Rather, this metric is intended to incentivize and capture services that can be provided within primary care by specific team members with social-emotional health expertise to provide issue-focused interventions. For many primary care practices, this may be their **integrated behavioral health** staff. Additionally, some primary care practices are investing in **traditional health workers** that can play a role in coaching and supporting families with identified needs, and the applicable claims they could use are included in this metric.

For community-based providers who are contracted with the CCOs, this metric includes applicable claims that staffing with various expertise and abilities to address behaviors could use in supporting young children.

Frequently Asked Questions About the Young Children Receiving Social-Emotional Issue-Focused Intervention/Treatment Services Metric?

Is there a presentation on the child-level metric that I can watch to learn more?

- Yes! OPIP conducted an educational webinar for the members of Metrics and Scoring Committee (who select the metrics in the CCO incentive metric set) that explains why the metric is focused on issue-focused interventions and how the specific claims included the metric were identified.
- You can view this presentation [here](#)
- Additional background materials on the metric can be found [here](#)

Is screening included in the child-level metric?

- No, population-based screening is not included in the 2025 child-level metric
- The metric is specifically focused on services that support children when issues are identified and supports are needed.



Are there specific diagnoses or provider types required?

- Within the child-level metric specifications, there are NO diagnostic pairings required or provider-type requirements. That said, specific codes and specific plan contracts may require diagnostic pairings and/or provider type pairings for reimbursement.

How is this metric aligned with clinical recommendations?

- The metric is aligned with Bright Futures, and therefore EPSDT recommendations for young children (https://downloads.aap.org/AAP/PDF/periodicity_schedule.pdf).
- The metric is focused on the evidence-based follow-up that should occur when a child is identified with social-emotional issues as a result of Bright Futures-recommended surveillance and screening, such as social-emotional screening, developmental screening that includes SE components, autism screening and maternal depression screening.

Is the metric focused solely on services that happen in primary care?

- No, the metric intentionally focuses on a variety of sectors that can provide issue-focused interventions and are needed within the CCO contract to meet the needs of young children.
- The metric is NOT just anchored to primary care: primary care does a play a role, but there are other sectors – like specialty behavior health and community-based organizations - that are needed.

Links to More Resources:

- 1) [OPIP's educational webinar on social-emotional issue focused interventions/treatment for young children for the Metrics & Scoring Committee](#)
- 2) [2025 Specifications: Young Children Receiving Social-Emotional Issue-Focused Intervention/Treatment Services](#)
- 3) [Summary of public comment about the need for the targeted focus of the metric](#)
- 4) [OPIP's Website](#)