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Medicaid Adult Quality Measures Template in CARTS

Friday, July 18, 2014

Medicaid Adult Quality Measures Template in CARTS

Welcome to CARTS, Megan Thomas

You have been granted access to the Medicaid Adult Quality Measures Template in CARTS. You may choose from the options on the left. If at any time you need to return to this main page, please click on the CMS Logo in the upper left-hand corner of your screen. Please note that in order to avoid text formatting problems ensure your "Text Size" is set to "Medium" or smaller. The "Text Size" setting is found under the view menu at the top of Internet Explorer. If you need any assistance during your time here, please feel free to browse through our System Help by clicking the Help button. CMS will consider the reports as draft state reports until the state certifies the report as final. While states may submit a draft report, CMS will not retain the draft report. If you have any further questions that cannot be answered by System Help, please feel free to contact the individual listed below.

Jason L Williams
410-786-5910
jason.williams1@cms.hhs.gov

To change your password, [click here](#).

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State: Year: Program:

CHOOSE FUNCTION:

- Add/Modify
- Browse
- Delete
- Certify
- Uncertify
- Export Survey to Word Document
- Attachment Facility
- Audit

Adult Health Care Quality Measures

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Medicaid Adult Quality Measures Template in CARTS

Annual Report | Central Office | Report Queue | System Help | Logout

Adult Health Care Quality Measures Instructions

Page Instructions of 26 Expand »

Reporting of the Initial Core Set of Health Care Quality Measures for Medicaid-Eligible Adults (Medicaid Adult Core Set)

BACKGROUND

The Affordable Care Act (Section 1139B) required the Secretary of the Department of Health and Human Services (HHS) to identify and publish an initial core set of health quality measures for adult Medicaid enrollees (Medicaid Adult Core Set). Additionally, the law required the development of a standardized reporting format for states that volunteer to report on the Medicaid Adult Core Set measures. This CARTS template will be used for standardized reporting on these measures.

The Technical Specifications and Resource Manual for the Medicaid Adult Core Set can be found at:
<http://www.medicaid.gov/Medicaid-CHIP-Program-Information/By-Topics/Quality-of-Care/Downloads/Medicaid-Adult-Core-Set-Manual.pdf>

Measure	Measure Steward	Measure Description
Flu Shots for Adults Ages 50 to 64	NCQA/HEDIS (http://www.ncqa.org)	Rolling average represents the percentage of Medicaid enrollees ages

Inbox - Thomas, ... | RE: Crosswalk Ne... | CARTS - Windo... | Document2 - Mic... | Document1 - Mic... | 1:22 PM 07/18/2014

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CMS | Menu Off | CURRENT USER: Megan Thomas | Prod | LOG-IN DATE: 7/18/2014

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	56 days after delivery
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GUIDANCE FOR REPORTING

States should report performance measurement data for the current year (to the extent that data are available). Additional instructions for completing each section of the template are provided below. Data entry in all fields is required unless otherwise specified.

Did you Report on this Measure?
 States should indicate whether or not they are reporting the measure by selecting either Yes or No.

If Data Not Reported, Please Explain Why:
 If your state cannot report a specific measure, please check the box that applies to why data are not being reported for each measure. The user may select any applicable reason why data are not being reported, but must select at least one response as follows.

- **Service not covered:** Check this box if your program does not cover this service.
- **Population not covered:** Check this box if your program does not cover the population included in the measure. If this box is selected, users will also need to indicate whether the entire population or partial population was covered under its program. A detailed explanation is required if partial population is not covered.
- **Data not available:** Check this box if data are not available for this measure in your state. If this box is selected, users will also need to explain why data are not available for reporting. Reasons may include "Budget Constraints", "Staff Constraints", "Data Inconsistencies/Accuracy", "Data Source Not Easily Accessible", "Information Not Collected" and "Other".
- **Small Sample Size (less than 30):** Check this box if the denominator size for this measure is less than 30. If the denominator size is

* Note: selecting "Next-->" will save all current selections

Inbox - Thomas, ... | RE: Crosswalk Ne... | CARTS - Windo... | Document1 - Mic... | 1:23 PM 07/18/2014

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File Edit View Favorites Tools Help

CMS | **Menu Off** | **CURRENT USER: Megan Thomas** | **Prod** | **LOG-IN DATE: 7/18/2014**

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Annual Report
Central Office
Report Queue
System Help
Logout

provision of an "Other" reason for not reporting will assist CMS in that understanding.

The Information for this Measure is Being Provided to Meet the Requirements for the Adult Medicaid Quality Measures Grant:
States should indicate whether they are reporting a specific measure: to fulfill the requirements of the Adult Medicaid Quality Measures Grant Program ("Yes"), for voluntary reporting of the Medicaid Adult Core Set ("No"), or for purposes of both the Adult Medicaid Quality Measures Grant program and voluntary reporting of the Medicaid Adult Core Set ("Both").

Status of Data Reported:
Please indicate the status of the data you are reporting, as follows:

- **Provisional:** Check this box if you are reporting data for a measure, but the data are currently being modified, verified, or may change in any other way before you finalize them for the current CARTS reporting period.
- **Final:** Check this box if the data you are reporting are considered final for the current CARTS reporting period.

Measurement Specification:
For each measure, the state should indicate whether a measure adheres to the technical specifications provided by the measure steward (e.g., NCQA, AHRQ) or "Other" measurement specifications. If NCQA is selected, the HEDIS® Version field must be completed (with the exception of the annual HIV/AIDS medical visits measure). If "Other" measurement specification is selected, an explanation must be provided.

CMS encourages states to use the technical specifications outlined in the [Technical Specifications and Resource Manual](#).

* Next --> Return to Menu

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Inbox - Thomas, ... | RE: Crosswalk Ne... | CARTS - Windo... | Document1 - Mic... | 1:23 PM 07/18/2014

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File Edit View Favorites Tools Help

CMS | **Menu Off** | **CURRENT USER: Megan Thomas** | **Prod** | **LOG-IN DATE: 7/18/2014**

Medicaid Adult Quality Measures Template in CARTS

Annual Report
Central Office
Report Queue
System Help
Logout

Data Source:
Data for the Medicaid Adult Core Set measures may come from several sources, including medical claims and medical records. For each measure, the state must indicate the source of data or methodology used to calculate the measure using the following options (some options are unavailable for some measures):

- **Administrative Data:** Medical claims and encounter data. If this box is selected, the user must then indicate whether the administrative data for a measure are coming from the Medicaid Management Information System (MMIS) or describe another administrative data source.
- **Hybrid:** A combination of administrative and medical records data. An explanation box is available for the state to provide more detailed information about how the two sources were used to create the rate.
- **Survey Data:** The state should specify the survey used.
- **Other:** An explanation box is available for the state to specify the other source of data.

Date Range:
Define the date range for the reporting period based on the "From" time period as the month and year that corresponds to the beginning period in which utilization took place and please report the "To" time period as the month and year that corresponds to the end period in which utilization took place. Do not report the year in which data were collected for the measure, or the version of HEDIS® used to calculate the measure, both of which may be different from the period corresponding to utilization of services.

Definition of Population Included in the Measure:

Definition of the Denominator:

* Next --> Return to Menu

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Inbox - Thomas, ... | RE: Crosswalk Ne... | CARTS - Windo... | Document1 - Mic... | 1:23 PM 07/18/2014

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CMS | Menu Off | CURRENT USER: Megan Thomas | Prod | LOG-IN DATE: 7/18/2014

Medicaid Adult Quality Measures Template in CARTS

Annual Report | Central Office | Report Queue | System Help | Logout

Other Performance Measure:
 If the state selected "Other" in the "Measure Specification" section of the template, and is thus reporting using another methodology, the user is required to provide a description of the measure, along with the numerator, denominator, and rate in the "Other Performance Measure" section. If reporting with another methodology, and the form fields do not give you enough space to fully report on the measure, please use please upload the information to the attachment facility, along with a brief description of the measure (e.g. "data reported for individuals in the 18-64 age range. "Additional Notes/Comments on Measure" may be entered but is not required.

Optional Measure Stratification:
 If states are able to stratify data for a measure by race (non-Hispanic), ethnicity, sex, primary spoken language, disability status, or geography, states may provide these data in the "Optional Measure Stratification" section. While reporting in this section is not required (unless reporting to meet the requirements of the Adult Quality Grants), this information will help CMS track and monitor health and health care disparities both nationally and within states.

If there are other or additional racial, ethnic, sex, language, disability status, or geographic stratifications your state wants to report that are not specified in the form provided, please upload the numerator(s), denominator(s), and rate(s), along with a brief description of the stratification, to the attachment facility.

Certification
 After a state has completed data entry, certify the data submission on the certification page. Once data are certified, no further data entry or editing is allowed unless a request is made to CMS to uncertify these data.

* Next --> | Return to Menu

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Inbox - Thomas, ... | RE: Crosswalk Ne... | CARTS - Windo... | Document1 - Mic... | 1:24 PM 07/18/2014

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CMS | Menu Off | CURRENT USER: Megan Thomas | Prod | LOG-IN DATE: 7/18/2014

Medicaid Adult Quality Measures Template in CARTS

Annual Report | Central Office | Report Queue | System Help | Logout

Measure: Flu Shots for Adults | Page 1 of 26 | Expand »

FFY 2013

Did you Report on this Measure?
 Yes
 No

If Data Not Reported, Please Explain Why
Select all that apply (Must select at least one):

Service not covered.
 Population not covered.
 Entire population not covered
 Partial population not covered
Explain the partial population not covered. [2000]

Data not available
Explain why data not available:
 Budget constraints
 Staff constraints
 Data inconsistencies/accuracy
Please explain: 120001

Inbox - Thomas, ... | RE: Crosswalk Ne... | CARTS - Windo... | Document1 - Mic... | 1:32 PM 07/18/2014

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 CARTS

CMS |
 Menu Off |
 CURRENT USER: Megan Thomas |
 Prod |
 LOG-IN DATE: 7/18/2014

Medicaid Adult Quality Measures Template in CARTS

Measure: Flu Shots for Adults |
 Page 1 of 26 |
 Expand »

The information for this measure is being provided to meet the requirements for the Adult Medicaid Quality Measures Grant:

- Yes (to fulfill grant requirement)
- No (this information is for voluntary core set reporting)
- Both (grant requirement and voluntary core set reporting)

Status of Data Reported:

- Provisional
- Final

Measurement Specification:

- NCQA
 - Specify version of HEDIS used below [4]
 - 2013
- Other
 - Explain: [2000]

Data Source:

- CAHPS 5.0H
- Other
 - Explain: [2000]

Annual Report | Central Office | Report Queue | System Help | Logout

1:32 PM 07/18/2014

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 [MSN.com](#) |
 [Google](#) |
 CARTS

CMS |
 Menu Off |
 CURRENT USER: Megan Thomas |
 Prod |
 LOG-IN DATE: 7/18/2014

Medicaid Adult Quality Measures Template in CARTS

Measure: Flu Shots for Adults |
 Page 1 of 26 |
 Expand »

Date Range:
 Start Date: (mm/yyyy) 12/2012 End Date: (mm/yyyy) 05/2013

Definition of Population Included in the Measure:

Definition of denominator:
Select all that apply:

- Denominator includes Medicaid population only
- Denominator includes CHIP population only (e.g. pregnant women).
- Denominator includes Medicare and Medicaid Dually-Eligible population
- Other
 - Specify: [2000]

Does this denominator represent your total eligible population as defined by the Technical Specifications for this measure?

- Yes
- No

Which delivery systems are represented in the denominator?
Select all that apply (Must select at least one):

- Fee-for-Service

Annual Report | Central Office | Report Queue | System Help | Logout

1:33 PM 07/18/2014

<https://carts.medicaid.gov/SCHIPAnnualReport> |
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 [MSN.com](#) |
 [Google](#) |
 [CARTS](#)

CMS |
 Menu Off |
 CURRENT USER: Megan Thomas |
 Prod |
 LOG-IN DATE: 7/18/2014

Medicaid Adult Quality Measures Template in CARTS

Measure: Flu Shots for Adults | Page 1 of 26 | [Expand »](#)

Annual Report
 Central Office
 Report Queue
 System Help
 Logout

Which delivery systems are represented in the denominator?
Select all that apply (Must select at least one):

- Fee-for-Service
Percentage of population represented: [10]
 100
- Primary Care Case Management (PCCM)
Percentage of population represented: [10]
- Managed Care Organization/Prepaid Inpatient Health Plan (MCO/PIHP)
Number of health plans: [10]
Percentage of population represented: [10]
- Integrated Care Models (ICM)
Percentage of population represented: [10]
- Other
Describe: [2000]
Percentage of population represented: [10]

1:33 PM 07/18/2014

<https://carts.medicaid.gov/SCHIPAnnualReport> |
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 [MSN.com](#) |
 [Google](#) |
 [CARTS](#)

CMS |
 Menu Off |
 CURRENT USER: Megan Thomas |
 Prod |
 LOG-IN DATE: 7/18/2014

Medicaid Adult Quality Measures Template in CARTS

Measure: Flu Shots for Adults | Page 1 of 26 | [Expand »](#)

Annual Report
 Central Office
 Report Queue
 System Help
 Logout

Deviations from Measure Specifications:

Did your calculation of this measure deviate from the measure specifications in any way?

- Yes
- No

If yes, select all that apply:

- Numerator.
Explain: [2000]
- Denominator.
Explain: [2000]
- Other.
Explain: [2000]
 This measure was run for all eligible Medicaid members over age 17 on 3/31/13 residing in NH with continuous enrollment in at least 5 of the last 6 months (Oct 2012 - Mar 2013, excluded anyone that did not have full month eligibility for at least 5 of these 6 months, also excluded anyone showing less than 31 days eligibility for the month of Mar 2013); excluding VA Beneficiaries, Children eligible for Medicaid due to Foster Care or Adoption Subsidy, Medicare Beneficiaries without full Medicaid coverage, Licensed Group Home residents, Protected Medicaid members, and Refugees.

Performance Measure

1:33 PM 07/18/2014

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 Google |
 CARTS

CMS |
 Menu Off |
 CURRENT USER: Megan Thomas |
 Prod |
 LOG-IN DATE: 7/18/2014

Medicaid Adult Quality Measures Template in CARTS

Measure: Flu Shots for Adults

Page 1 of 26 [Expand »](#)

Annual Report

Central Office

Report Queue

System Help

Logout

Performance Measure
A rolling average represents the percentage of Medicaid enrollees 50-64 years of age who received an influenza vaccine between September 1 of the measurement year and the date when the CAHPS 5.0H adult survey was completed.

Numerator: 19,249.0
 Denominator: 31,569.0
 Rate: 61.0

Additional notes/comments on measure:
 Only one year of data, so not a rolling average

Other Performance Measure:
If reporting with another methodology, please describe:

Numerator:
 Denominator:
 Rate:

If reporting with another methodology, and there are additional numerators, denominators and rates you want to report, please upload the information to the attachment facility, along with a brief description of the measure (e.g. "data reported for individuals in the 18-64 age range").

Optional Measure Stratification

Inbox - Thomas, ... | RE: Crosswalk Ne... | CARTS - Windo... | Document1 - Mic... | 1:33 PM 07/18/2014

<https://carts.medicaid.gov/SCHIPAnnualReport> |
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 MSN.com |
 Google |
 CARTS

CMS |
 Menu Off |
 CURRENT USER: Megan Thomas |
 Prod |
 LOG-IN DATE: 7/18/2014

Medicaid Adult Quality Measures Template in CARTS

Measure: Flu Shots for Adults

Page 1 of 26 [Expand »](#)

Annual Report

Central Office

Report Queue

System Help

Logout

Optional Measure Stratification
If there are other or additional racial, ethnic, sex, language, disability status, or geographic stratifications you want to report, please upload the numerator(s), denominator(s), and rate(s), along with a brief description of the stratification, to the attachment facility.

Race (non-Hispanic)

<input type="checkbox"/> White <i>Numerator:</i> <i>Denominator:</i> <i>Rate:</i>	<input type="checkbox"/> Black or African American <i>Numerator:</i> <i>Denominator:</i> <i>Rate:</i>
<input type="checkbox"/> American Indian or Alaska Native <i>Numerator:</i> <i>Denominator:</i> <i>Rate:</i>	<input type="checkbox"/> Asian <i>Numerator:</i> <i>Denominator:</i> <i>Rate:</i>
<input type="checkbox"/> Native Hawaiian or Other Pacific Islander	

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