QUALIFIED
ENTITY
CERTIFICATION
PROGRAM
FOR MEDICARE DATA

QECP DATA SOURCE ATTESTATION

Lead Entity Applying for Qualified Entity Certification Program (QECP)	
Legal Name of Applying Entity	
Trade Name/DBA	
Name of Data Recipient *(if different from Applying Entity)*	

Complete the Provider Reporting Profile table *once.*

Provider Reporting Profile	
1. For the provider types (specified in Element 1C) in the geographic region (specified in Element 1B) you intend to report, what proportion of these practicing providers will be included in your performance reports?	
2. Provide an estimate of <u>all</u> covered lives (i.e., insured-commercial, Medicaid, Medicare Advantage, and Medicare FFS) **in the geographic region you plan to cover in your QE performance reports.**	**Total Number of Covered Lives in Geographic Coverage Area:** *(Please see <u>Appendix A, Section 2</u> for instructions)*
3. Provide the total number of covered lives included in <u>all</u> claims data sources you will obtain (i.e., the data from which you pull data for reporting, not the sum of the measure denominators).	**3a) Total Number of Covered Lives in Claims Data from Data Suppliers (excluding Medicare FFS data):** **3b) Total Number of Covered Lives in Medicare FFS data:** *(Please see <u>Appendix A, Section 1</u> for instructions)*

	Hint: Unless your data sources will contain claims data on <u>all</u> covered lives in the geographic coverage area, the sum of questions 3a and 3b should be less than the number reported for question 2.
4. Provide the range and average number of covered lives per provider on which you intend to report (i.e., the provider in the QE database for which you have measures where that type of provider is assessed, not the sum of their measure denominators).	**Covered Lives Per Provider (excluding Medicare FFS data):** Range (minimum and maximum) of covered lives: Mean # of covered lives: **Covered Lives Per Provider (including Medicare FFS data):** Range (minimum and maximum) of covered lives: Mean # of covered lives:

Repeat the Data Supplier Profile table *for each data supplier* relevant to the applicant's Qualified Entity application and program.

Data Supplier Profile	
Legal Name of Data Supplier	
Trade Name/DBA	
Effective Dates of Agreement	
Contact Name	
Contact Title	
Contact Email	
Street Mailing Address	
Suite/Mail Stop	
City, State, Zip	
Phone	
Fax	
Website URL	
Data Detail	

1. Volume of QE Data (e.g., # of covered lives and claim lines) Hint: The number of covered lives reported for all individual data supplier profiles must add up to the number reported for question 3a in the provider reporting profile above.	**Covered Lives:** **Claim Lines:**		
Geographic Coverage Area of Data Received from Supplier to be Included in QE Performance Reports	**List state(s) in which your data and reporting cover the entire state:**		
	List state(s) in which your data and reporting cover only part of the state:		
	For partial covered states, list **Counties covered:** **OR** **MSAs covered:** **OR** **Other regional boundary:**		
Provider Types in Data Received from Supplier to be Included in QE Performance Reports (check all that apply):	☐ Physicians ☐ Hospitals (excluding critical access) ☐ Critical access hospitals ☐ Skilled nursing facilities ☐ Comprehensive outpatient rehabilitation facilities ☐ Home health agencies ☐ Hospice programs ☐ Other Specify:_____		

Signatures

To the best of my knowledge and belief, all data in this attestation are true and correct. The document has been authorized by the Qualified Entity Certification Program (QECP) Applicant in reference to the QECP Applicant's data supplier(s).

QECP Applicant

Authorized Representative Name (printed) _____

Authorized Representative Title (printed) _____

Signature_____ Date _____

Phone _____

QUALIFIED
ENTITY
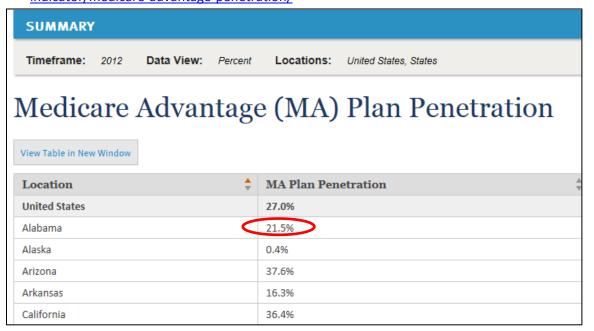CERTIFICATION
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Appendix A

1. How to Determine the Total Number of Covered Lives (Enrollment) in the Medicare FFS Data for your QE Geographic Coverage Area

1.1 Medicare FFS Enrollment by State

a. Visit: http://www.cms.gov/Research-Statistics-Data-and-Systems/Statistics-Trends-and-Reports/MedicareEnrpts/Downloads/Sageall12.pdf

b. Obtain the state total from the first column 'A and/or B.' See screenshot below:

MEDICARE ENROLLMENT DATA BY STATE AND AGE
AS OF JULY 1, 2012

AREA OF RESIDENCE *US AND OTHER AREAS	AGE GROUP	A and/or B 61,033,185	A and B 55,986,201	A Only 5,481,060	B Only 456,858
Alabama	Age 0-64	263,474	241,676	26,578	222
Alabama	Age 65-69	269,992	239,331	34,289	2,230
Alabama	Age 70-74	198,520	189,141	8,709	1,595
Alabama	Age 75-79	147,210	143,257	3,045	1,118
Alabama	Age 80-84	105,565	103,374	1,521	752
Alabama	Age 85+	92,469	88,169	3,489	868
Alabama Total		**1,077,230**	**1,004,948**	**77,631**	**6,785**

c. Obtain the Medicare Advantage penetration rate: http://kff.org/other/state-indicator/medicare-advantage-penetration/

SUMMARY

Timeframe:	2012	Data View:	Percent	Locations:	United States, States

Medicare Advantage (MA) Plan Penetration

View Table in New Window

Location	MA Plan Penetration
United States	27.0%
Alabama	21.5%
Alaska	0.4%
Arizona	37.6%
Arkansas	16.3%
California	36.4%

d. To determine the number of Medicare FFS enrollees for an entire state (excluding Medicare Advantage enrollees), adjust down the number obtained in Step 1.1.b by the percentage obtained in Step 1.1.c. For example, Alabama FFS enrollment = 1,077,230 * (1 - 0.215) = 845,625

1.2 Medicare FFS Enrollment by County

a. Visit: http://www.cms.gov/Research-Statistics-Data-and-Systems/Statistics-Trends-and-Reports/MedicareEnrpts/Downloads/County2010.pdf

b. Use the total from the first section of columns 'Hospital and/or Supplemental Medical.' See screenshot below:

STATE	COUNTY	HOSPITAL AND/OR SUPPLEMENTAL MEDICAL			HOSPITAL INSURANCE			SUPPLEMENTAL MEDICAL INSURANCE		
		TOTAL	AGED	DISABLED	TOTAL	AGED	DISABLED	TOTAL	AGED	DISABLED
Ohio	Cuyahoga	223,806	188,901	34,905	221,287	186,388	34,899	207,790	176,485	31,305

c. Obtain Medicare Advantage enrollment by county, using the "Refine Results" toolbar on the left-hand side of the screen: http://kff.org/medicare/state-indicator/total-enrollment-2/

SUMMARY

Timeframe:	2012	Data View:	Number	Locations:	United States, States

Medicare Advantage: Total Enrollment

View Table in New Window

Location	Overall
Cuyahoga, Ohio	83,265

d. To determine the number of Medicare FFS enrollees for a particular county (excluding Medicare Advantage enrollees), subtract the number obtained in Step 1.2.c from the number obtained in Step 1.2.b. For example, Cuyahoga, Ohio FFS enrollment = 223,806 – 83,265 = 140,541

1.3 Reporting Medicare FFS Enrollment in the 2013 Annual Report Workbook

Add together all Medicare FFS enrollees for the states and/or counties in your QE geographic coverage area (i.e., Step 1.1.d + Step 1.2.d) and report as the response to Question 3b in the Provider Reporting Profile of the Element 2A Data Source Attestation. This number is also reported in Table 1, Question 2.a.ii, in the 2013 Annual Report Workbook.

2. How to Determine the Total Number of Covered Lives in your QE Geographic Coverage Area

a. Visit: http://factfinder2.census.gov/faces/nav/jsf/pages/index.xhtml

b. Click on "Advanced Search"

c. Under "Topic or Table Name" enter: Health Insurance

d. Under State, county, or place, enter your geographic coverage area (i.e., state name or county name). Do not enter more than one geographic area into the search at a time (i.e. several counties).

e. Please use ID #2701, Health Insurance Coverage Status, 2012 ACS 1-year estimates. If, for some counties, 2012 1-year estimates are not available, use 2012 ACS 3-year estimates. If neither 1- or 3-year estimates are available, use 2012 ACS 5-year estimates.

f. In order to determine the number of covered lives in the state or county, you will need to **subtract** the number uninsured from the total population. See screenshot below:

	Minnesota				
	Total		Number Uninsured		
Subject	Estimate	Margin of Error	Estimate	Margin of Error	Est
Total civilian noninstitutionalized population	5,319,783	+/-751	424,662	+/-11,361	
AGE					

g. Add together all covered lives in your geographic coverage area and report as the response to Question 2 in the Provider Reporting Profile of the Element 2A Data Source Attestation. This number is also reported in Table 1, Question 3, in the 2013 Annual Report Workbook.