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CMS eXpedited Life Cycle (XLC)

Medicaid and CHIP Program (MACPro)

HHQM - AMB PRA document

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1. Health Homes Quality Measure

1.1 Ambulatory Care – Emergency Department Visits (AMB) – Path 1

News Tasks (6) **Records** Reports Actions Applan

Ambulatory Care - Emergency Department Visits (AMB)
CMS-10434 OMB 0938-1188

Health Homes Quality Measure - NV - 2016

Request System Help

REQUEST TECHNICAL ASSISTANCE CLEAR VIEW ALL RESPONSES

View Implementation Guide

Are you reporting on this measure? *

Yes
 No

Measurement Specification

National Committee for Quality Assurance (NCQA)/Healthcare Effectiveness Data and Information Set (HEDIS)
 Other

Data Source

Administrative Data Only
 Other

Date Range

Please 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 from the measure, or the version of HEDIS® used to calculate the measure, both of which may be different from the period corresponding to the utilization of services.

Start Date

Select Month Select Year

Month Year

End Date

Select Month Select Year

Month Year

Figure 1: AMB Reporting – Yes

1.2 Measurement Specification – Path 1

News Tasks (6) **Records** Reports Actions Applan

Ambulatory Care - Emergency Department Visits (AMB)
CMS-10434 OMB 0938-1188

Health Homes Quality Measure - NV - 2016

Request System Help

REQUEST TECHNICAL ASSISTANCE CLEAR VIEW ALL RESPONSES

View Implementation Guide

Are you reporting on this measure? *

Yes
 No

Measurement Specification

National Committee for Quality Assurance (NCQA)/Healthcare Effectiveness Data and Information Set (HEDIS)
 Other

Specify version of HEDIS used *

Select Year

HEDIS: Healthcare Effectiveness Data and Information Set

Data Source

Administrative Data Only
 Other

Figure 2: Measurement Specification 1

1.3 Measurement Specification – Path 2

News Tasks (6) **Records** Reports Actions Applan

Measurement Specification +/-

National Committee for Quality Assurance (NCQA)/Healthcare Effectiveness Data and Information Set (HEDIS) **Explain ***

Other

Data Source +/-

Administrative Data Only

Other

Date Range +/-

Please 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 from the measure, or the version of HEDIS® used to calculate the measure, both of which may be different from the period corresponding to the utilization of services.

Figure 3: Measurement Specification 2

1.4 Date Range

News Tasks (4) **Records** Reports Actions Applan

Administrative Data

Hybrid (Administrative and Medical Records Data)

Other

Date Range +/-

Please 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 from the measure, or the version of HEDIS® used to calculate the measure, both of which may be different from the period corresponding to the utilization of services.

Start Date

September 2002

Month Year

End Date

October 2009

Month Year

Definition of Population Included in the Measure +/-

Definition of Denominator

Select all that apply:

Figure 4: Date Range

1.5 Definition of Population Included in the Measure

Definition of Population Included in the Measure

Definition of Denominator
Select all that apply

- Denominator includes Medicaid population
- Denominator includes Medicare and Medicaid Dually-Eligible population
- Other

Specify *

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

Yes

No

Explain which populations are excluded and why *

Specify total measure-eligible population *

Figure 5: Denominator Representation 1

1.6 Selection of Delivery Systems

Which delivery systems are represented in the Denominator?
Select all delivery systems that cover the measure-eligible population in your state. For each delivery system selected, report the percentage of the measure-eligible population that is represented in the data reported for the measure and the number of the health plans included (where applicable).

- Fees-for-Service (FFS)
- Primary Care Case Management (PCCM)
- Managed Care Organization / Pre-paid Inpatient Health Plan (MCO/PIHP)
- Integrated Care Models (ICM)
- Other

Percentage of measure-eligible state population represented in data reported *

Percentage of measure-eligible state population represented in data reported *

Number of Health Plans *

Percentage of measure-eligible state population represented in data reported *

Percentage of measure-eligible state population represented in data reported *

Describe *

Percentage of measure-eligible state population represented in data reported *

If applicable, list the number of Health Plans represented

Are all Health Home Providers represented in the denominator?*

Yes

No

Performance Measure

Number of inpatient hospital admissions for ambulatory care sensitive chronic conditions per 100,000 enrollee months for Health Home enrollees age 18 and older. This measure includes adult hospital admissions for diabetes with short-term complications, diabetes with long-term complications, uncontrolled diabetes without complications, diabetes with lower-extremity amputation, chronic obstructive pulmonary disease, asthma, hypertension, heart failure, or angina without a cardiac procedure.

Figure 6: Denominator Representation 2

1.7 Health Home Providers Representation

News Tasks (5) **Records** Reports Actions Applan

If applicable, list the number of Health Plans represented

Are all Health Home Providers represented in the denominator? *

Yes

No

Please explain *

Performance Measure

The percentage of Health Home enrollees ages 18 to 74 who had an outpatient visit and whose body mass index (BMI) was documented during the measurement year or the year prior to the measurement year.

Age Range: 18-64

Please explain why data was not entered for this numerator/denominator/rate set *

Character count: 0/2000

Figure 7: Denominator Representation 3

1.8 Performance Measure (checked all age range) Path - 1

Vendor Central Vendor Central Vendor Central Vendor Central Vendor Central NV - Health Homes Qual

News Tasks (6) **Records** Reports Actions Applan

Performance Measure

The rate of emergency department (ED) visits per 1,000 enrollee months among Health Home enrollees.

Age Range: 0-17

ED Visits	Enrollee Months	Visits per 1,000 Enrollee Months
0	0	0

Age Range: 18-64

ED Visits	Enrollee Months	Visits per 1,000 Enrollee Months
0	0	0

Age Range: 65 and older

ED Visits	Enrollee Months	Visits per 1,000 Enrollee Months
0	0	0

Age Range: Total

ED Visits	Enrollee Months	Visits per 1,000 Enrollee Months
0	0	0

Additional Notes/Comments on Measure

Character count: 0/2000

Deviations from Measure Specifications

Figure 8: Performance Measure 1

1.9 Performance Measure (Check one age range) Path -2 Option Yes

News Tasks (6) **Records** Reports Actions
Applan

Performance Measure +/-

The rate of emergency department (ED) visits per 1,000 enrollee months among Health Home enrollees.

Age Range: 0-17

ED Visits	Enrollee Months	Visits per 1,000 Enrollee Months
0	0	0

Age Range: 18-64

Please explain why data was not entered for this numerator/denominator/rate set *

Character count: 0/2000

Age Range: 65 and older

Please explain why data was not entered for this numerator/denominator/rate set *

Character count: 0/2000

The option "Denominator includes Medicare and Medicaid Dually-Eligible population" was selected in the "Definition of Population Included in the Measure" section; however, no data were reported for the population age 65 and older. Are data available for population age 65 and over? *

Yes
 No

Please either:

1. enter a N/D/R for this age group.
2. return to the "Definition of Population Included in the Measure" section and de-select the option "Denominator includes Medicare and Medicaid Dually-Eligible population", or
3. explain below why data were not reported for age 65 and older (for example if the 65 and older group were combined with the 18-64 age group).

"Denominator includes Medicare and Medicaid Dually-Eligible population" was selected, but a numerator, denominator, and rate were not reported for the 65 and older population. Please explain why *

Age Range: Total

Figure 9: Performance Measure 2

1.10 Performance Measure (Check one age range) Path – 2 Option No

The rate of emergency department (ED) visits per 1,000 enrollee months among Health Home enrollees.

Age Range: 0-17

ED Visits	Enrollee Months	Visits per 1,000 Enrollee Months
0	0	0

Age Range: 18-64
Please explain why data was not entered for this numerator/denominator/rate set *

Character count: 0/2000

Age Range: 65 and older
Please explain why data was not entered for this numerator/denominator/rate set *

Character count: 0/2000

The option "Denominator includes Medicare and Medicaid Dually-Eligible population" was selected in the "Definition of Population Included in the Measure" section; however, no data were reported for the population age 65 and older. Are data available for population age 65 and over? *

Yes
 No

If applicable, please return to the "Definition of Population Included in the Measure" section and de-select the option "Denominator includes Medicare and Medicaid Dually-Eligible population" or provide explanation below.

"Denominator includes Medicare and Medicaid Dually-Eligible population" was not de-selected, please explain why *

Age Range: Total
Please explain why data was not entered for this numerator/denominator/rate set *

Figure 10: Performance Measure 3

1.11 Other Performance Measure

Other Performance Measure

Please describe the other methodology used *

Please describe the rate (e.g., 18-64)	Numerator	Denominator	Rate
	0	0	0

Clear Row

+ Additional/Other Rate(s)

Additional Notes/Comments on Measure

Combined Rate(s) from Multiple Reporting Units

Figure 11: Other Performance Measure

1.12 Deviations from Measure Specifications

Character count: 0/2000

Deviations from Measure Specifications

Did your calculation of the measure deviate from the measure specification in any way? *

Yes
 No

Please select and explain the deviation(s)

Age Range: 0-17

Numerator Explain *

Denominator Explain *

Other Explain *

Age Range: 18-64

Numerator Explain *

Denominator Explain *

Figure 12: Deviations from Measure Specifications 1

Age Range: 18-64

Numerator Explain *

Denominator Explain *

Other Explain *

Age Range: 65 and older

Numerator Explain *

Denominator Explain *

Other Explain *

Figure 13: Deviations from Measure Specifications 2

The screenshot shows a web application interface with a top navigation bar containing 'News', 'Tasks (6)', 'Records' (highlighted), 'Reports', and 'Actions'. A user profile icon for 'Aprian' is in the top right. The main content area is divided into two columns. The left column contains a list of deviation items, each with a checked checkbox and a category label: 'Denominator', 'Other', 'Age Range: Total' (with a checked 'Numerator' sub-item), 'Denominator', and 'Other'. The right column contains five corresponding text input boxes, each labeled 'Explain *'. At the bottom of the interface, there is a section titled 'Combined Rate(s) from Multiple Reporting Units' with a sub-question: 'Did you Combine Rates from Multiple Reporting Units (e.g., Health Home Providers) to Create a Health Home State-Level Rate? *'. A small '+/-' icon is visible at the bottom right of the interface.

Figure 14: Deviations from Measure Specifications 3

1.13 Optional Measure Stratification

News Tasks (6) **Records** Reports Actions Applan

No

Optional Measure Stratification

If this measure is also reported by additional classifications/sub-categories, e.g. racial, ethnic, sex, language, disability status, or geography, complete the following as applicable.

Check all that apply

Race (Non-Hispanic)

White

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 0-17	0	0	0	Clear Row
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65 and older	0	0	0	Clear Row

+ Additional/Alternative Classification/Sub-category

Black or African American

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 0-17	0	0	0	Clear Row
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65 and older	0	0	0	Clear Row

+ Additional/Alternative Classification/Sub-category

American Indian or Alaska Native

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 0-17	0	0	0	Clear Row
Age Range: 18-64	0	0	0	Clear Row

Figure 15: Optional Measure Stratification 1

News Tasks (6) **Records** Reports Actions Applan

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65 and older	0	0	0	Clear Row

+ Additional/Alternative Classification/Sub-category

Asian

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 0-17	0	0	0	Clear Row
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65 and older	0	0	0	Clear Row

+ Additional/Alternative Classification/Sub-category

Native Hawaiian or Other Pacific Islander

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 0-17	0	0	0	Clear Row
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65 and older	0	0	0	Clear Row

+ Additional/Alternative Classification/Sub-category

+ Additional Race(s)

Ethnicity

Hispanic or Latino

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 0-17	0	0	0	Clear Row

Figure 16: Optional Measure Stratification 2

Records				Applan	
<input checked="" type="checkbox"/> Not Hispanic or Latino					
Classification/Sub-category	Numerator	Denominator	Rate		
Age Range: 0-17	0	0	0	Clear Row	
Age Range: 18-64	0	0	0	Clear Row	
Age Range: 65 and older	0	0	0	Clear Row	
+ Additional/Alternative Classification/Sub-category					
<input checked="" type="checkbox"/> Sex					
<input checked="" type="checkbox"/> Male					
Classification/Sub-category	Numerator	Denominator	Rate		
Age Range: 0-17	0	0	0	Clear Row	
Age Range: 18-64	0	0	0	Clear Row	
Age Range: 65 and older	0	0	0	Clear Row	
+ Additional/Alternative Classification/Sub-category					
<input checked="" type="checkbox"/> Female					
Classification/Sub-category	Numerator	Denominator	Rate		
Age Range: 0-17	0	0	0	Clear Row	
Age Range: 18-64	0	0	0	Clear Row	
Age Range: 65 and older	0	0	0	Clear Row	
+ Additional/Alternative Classification/Sub-category					
<input checked="" type="checkbox"/> Primary Spoken Language					

Figure 17: Optional Measure Stratification 3

Records				Applan	
<input checked="" type="checkbox"/> Primary Spoken Language					
<input checked="" type="checkbox"/> English					
Classification/Sub-category	Numerator	Denominator	Rate		
Age Range: 0-17	0	0	0	Clear Row	
Age Range: 18-64	0	0	0	Clear Row	
Age Range: 65 and older	0	0	0	Clear Row	
+ Additional/Alternative Classification/Sub-category					
<input checked="" type="checkbox"/> Spanish					
Classification/Sub-category	Numerator	Denominator	Rate		
Age Range: 0-17	0	0	0	Clear Row	
Age Range: 18-64	0	0	0	Clear Row	
Age Range: 65 and older	0	0	0	Clear Row	
+ Additional/Alternative Classification/Sub-category					
<input checked="" type="checkbox"/> Disability Status					
<input checked="" type="checkbox"/> SSI					
Classification/Sub-category	Numerator	Denominator	Rate		
Age Range: 0-17	0	0	0	Clear Row	
Age Range: 18-64	0	0	0	Clear Row	
Age Range: 65 and older	0	0	0	Clear Row	
+ Additional/Alternative Classification/Sub-category					
<input checked="" type="checkbox"/> None					

Figure 18: Optional Measure Stratification 4

Non-SSI

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 0-17	0	0	0	Clear Row
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65 and older	0	0	0	Clear Row

Urban

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 0-17	0	0	0	Clear Row
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65 and older	0	0	0	Clear Row

Rural

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 0-17	0	0	0	Clear Row
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65 and older	0	0	0	Clear Row

Figure 19: Optional Measure Stratification 5

1.14 Final Comments and Report Documents

Final Comments (Optional)

Please enter any summary comments

Report Documents

Saved Documents

- Maximum documents that can be uploaded for this report: 84
- Maximum file size: 2MB
- Valid file extensions: pdf; ppt; doc; docx; xls; xlsx; pptx

Name	Description	Date Created	Updated By	Size	Type
No items available					

UPLOAD

DELETE DOCUMENT(S) SAVE DOCUMENT(S)

Figure 20: Final Comments and Report Documents

1.15 Ambulatory Care – Emergency Department Visits (AMB) Path - 2

The screenshot shows the 'Ambulatory Care - Emergency Department Visits (AMB)' reporting page. The user has selected 'No' for 'Are you reporting on this measure?'. The reasons for not reporting are: 'Service not covered', 'Population not covered', and 'Data not available'. Under 'Portion of population not covered', 'Partial population not covered' is selected. The 'Explain why data not available' section has 'Budget Constraints', 'Staff Constraints', and 'Data Inconsistencies/Accuracy' selected. Under 'Reason', 'Requires medical record review' and 'Requires data linkage, which does not currently exist' are selected.

Figure 21: AMB Reporting – No

This screenshot shows a more detailed view of the reporting reasons. 'Data Inconsistencies/Accuracy' is selected with an explanation box. 'Data not submitted by Providers to State' and 'Data source not easily accessible' are also selected. Under 'Reason' for 'Data source not easily accessible', 'Requires medical record review', 'Requires data linkage, which does not currently exist', and 'Other' are selected. 'Information not collected' is selected with 'Not collected by provider (hospital/health plan)' and 'Other' as reasons. 'Small sample size (less than 30)' is selected with an 'Enter specific sample size' field. 'Continuous enrollment requirement not met due to start date of SPA' and 'Other' are also selected.

Figure 22: AMB Reporting – No

Appendix A: Acronyms

Table 1: Acronyms

Acronym	Literal Translation
HHQM	Health Homes Quality Measure
AMB	Ambulatory Care – Emergency Department Visits
PRA	Paper Reduction Act of 1995