



**Centers for Medicare & Medicaid Services**  
**CMS eXpedited Life Cycle (XLC)**

## **Medicaid and CHIP Program (MACPro)**

### **HHQM-CDF PRA document**

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# 1. Health Homes Quality Measure

## 1.1 Screening for Clinical Depression and Follow-Up Plan (CDF) – Path 1

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

Screening for Clinical Depression and Follow-Up Plan (CDF)  
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**

Centers for Medicare and Medicaid Services (CMS) +/-  
 Other

**Explain\***

**Data Source**

Hybrid (Administrative and Medical Records Data) +/-  
 Electronic Health Record (EHR) Data  
 Other

Figure 1: CDF Reporting – Yes

## 1.2 Measurement Specification Path 1

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

REQUEST TECHNICAL ASSISTANCE CLEAR VIEW ALL RESPONSES  
View Implementation Guide

Are you reporting on this measure?\*

Yes  
 No

**Measurement Specification**

Centers for Medicare and Medicaid Services (CMS) +/-  
 Other

**Data Source**

Hybrid (Administrative and Medical Records Data) +/-  
 Electronic Health Record (EHR) 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**

.....

Figure 2: Measurement Specification 1

### 1.3 Measurement Specification Path 2

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

REQUEST TECHNICAL ASSISTANCE CLEAR VIEW ALL RESPONSES

View Implementation Guide

Are you reporting on this measure? \*

Yes  
 No

**Measurement Specification** +/-

Centers for Medicare and Medicaid Services (CMS)  
 Other

**Explain \***

**Data Source** +/-

Hybrid (Administrative and Medical Records Data)  
 Electronic Health Record (EHR) 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

Figure 3: Measurement Specification 2

### 1.4 Date Range

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

Character count: 0/2000

**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**

April 2003  
Month Year

**End Date**

July 2008  
Month Year

**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

Figure 4: Data Range

## 1.5 Definition of Population Included in the Measure

Figure 5: Definition of Population Included in the Measure 1

## 1.6 Sample Size and Measure-eligible population related to Data Source

Figure 6: Definition of Population Included in the Measure 2

## 1.7 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

Figure 7: Definition of Population Included in the Measure 3

## 1.8 Health Home Providers

Are all Health Home Providers represented in the denominator? \*

Yes

No

**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

Figure 8: Definition of Population Included in the Measure 4

## 1.9 Performance Measure with all Age Range

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

**Performance Measure** +/-

Percentage of Health Home enrollees age 12 and older screened for clinical depression on the date of encounter using an age-appropriate standardized depression screening tool, and if positive, a follow-up plan is documented on the date of the positive screen.

Age Range: 12-17

Numerator	Denominator	Rate
0	0	0

Age Range: 18-64

Numerator	Denominator	Rate
0	0	0

Age Range: 65 and older

Numerator	Denominator	Rate
0	0	0

Age Range: Total

Numerator	Denominator	Rate
0	0	0

Additional Notes/Comments on Measure

Figure 9: Performance Measure 1

## 1.10 Performance Measure with one Age Range

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

Age Range: 12-17

Numerator	Denominator	Rate
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

Figure 10: Performance Measure 2



## 1.11 Age Range 65 and over Path – 1

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

Age Range: Total

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

Character count: 0/2000

Additional Notes/Comments on Measure

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 \*

Figure 11: Performance Measure 3

## 1.12 Age Range 65 and over Path – 2

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

Age Range: Total

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

Character count: 0/2000

Additional Notes/Comments on Measure

Deviations from Measure Specifications

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 \*

Figure 12: Performance Measure 4

### 1.13 Other Performance Measure

Figure 13: Other Performance Measure

### 1.14 Deviations from Measure Specifications

Figure 14: Deviations from Measure Specifications 1

The screenshot shows a web application interface with a dark blue header. The header contains navigation tabs: 'News', 'Tasks (4)', 'Records' (highlighted in yellow), 'Reports', and 'Actions'. On the right side of the header is a user profile icon and the name 'Applan'. The main content area is divided into two sections. The first section is titled 'Age Range: 18-64' and contains three rows of deviation records. Each row has a checkbox on the left and an 'Explain \*' label above a text input field on the right. The second section is titled 'Age Range: 65 and older' and contains two rows of deviation records, each with a checkbox and an 'Explain \*' label above a text input field. A vertical scrollbar is visible on the right side of the content area.

Figure 15: Deviations from Measure Specifications 2

The screenshot shows a web application interface similar to Figure 15. The header is the same, with 'Records' highlighted. The main content area contains one section titled 'Age Range: Total' with three rows of deviation records. Each row has a checkbox on the left and an 'Explain \*' label above a text input field on the right. A vertical scrollbar is visible on the right side of the content area.

Figure 16: Deviations from Measure Specifications 3

# 1.15 Optional Measure Stratification

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

## 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: 12-17	10	10	10	Clear Row
Age Range: 18-64	0	0	10	Clear Row
Age Range: 65 and older	0	0	10	Clear Row

+ Additional/Alternative Classification/Sub-category

Black or African American

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 12-17	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  
 Asian  
 Native Hawaiian or Other Pacific Islander  
+ Additional Race(s)

Ethnicity

Hispanic or Latino

**Figure 17: Optional Measure Stratification 1**

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

American Indian or Alaska Native

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 12-17	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

Asian

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 12-17	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: 12-17	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

Figure 18: Option Measure Stratification 2

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

+ Additional Race(s)

Ethnicity

Hispanic or Latino

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 12-17	0	0	1	Clear Row
Age Range: 18-64	0	0	1	Clear Row
Age Range: 65 and older	0	0	1	Clear Row

+ Additional/Alternative Classification/Sub-category

Not Hispanic or Latino

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 12-17	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 Ethnicities)

Sex

Male

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 12-17	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: Option Measure Stratification 3

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

+ Additional Ethnicity(ies)

Sex

Male

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 12-17	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

Female

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 12-17	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

Primary Spoken Language

English

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 12-17	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

Figure 20: Optional Measure Stratification 4

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

Spanish

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 12-17	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 Primary Spoken Language(s)

Disability Status

SSI

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 12-17	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

Non-SSI

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 12-17	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 Disability Status(es)

Geozonhv

Figure 21: Optional Measure Stratification 5

The screenshot shows a web interface for 'Records' with a navigation bar (News, Tasks (4), Records, Reports, Actions) and a user profile (Appian). The main content area is titled '+ Additional Disability Status(es)'. It features two sections: 'Urban' and 'Rural', each with a table of 'Classification/Sub-category' (Age Range: 12-17, 18-64, 65 and older) and columns for 'Numerator', 'Denominator', and 'Rate'. Each table has a 'Clear Row' button. Below the tables is a section for 'Final Comments (Optional)' with a text input field and a 'Report Documents' link.

Figure 22: Optional Measure Stratification 6

## 1.16 Final Comments and Report Documents

The screenshot shows the 'Final Comments (Optional)' section with a text input field. Below it is the 'Report Documents' section, which includes a 'Saved Documents' list with instructions: 'Maximum documents that can be uploaded for this report: 84', 'Maximum file size : 2MB', and 'Valid file extensions: pdf; ppt; doc; docx; xls; xlsx; pptx'. A table with columns 'Name', 'Description', 'Date Created', 'Updated By', 'Size', and 'Type' is shown with 'No items available'. There is an 'UPLOAD' button and 'DELETE DOCUMENT(S)' and 'SAVE DOCUMENT(S)' buttons at the bottom.

Figure 23: Final Comments and Report Documents

## 1.17 Screen for Clinical Depression and Follow-up Plan (CDF) – Path 2

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

View Implementation Guide

**Are you reporting on this measure? \***

Yes

No

**Please explain why you are not reporting on the measure**

Select all that apply (must select at least one)

Service not covered

Population not covered

Data not available

**Portion of population not covered \***

Entire population not covered

Partial population not covered

**\* Explain the partial population not covered**

**Explain why data not available**

Select all that apply (must select at least one)

Budget Constraints

Staff Constraints

Data Inconsistencies/Accuracy

**\* Please explain**

Data not submitted by Providers to State

Data source not easily accessible

Figure 24: CDF Reporting – No -1

Data not submitted by Providers to State

Data source not easily accessible

**Reason** *Select all that apply*

Requires medical record review

Requires data linkage, which does not currently exist

Other

**\* Please explain**

Information not collected

**Reason** *Select all that apply*

Not collected by provider (hospital/health plan)

Other


**\* Please explain**

Other

**\* Please explain**

Figure 25: CDF Reporting – No - 2



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

Small sample size (less than 30)

Continuous enrollment requirement not met due to start date of SPA

Other

Other  
\* Please explain

Enter specific sample size \*

Explain other reason why data not reported \*

### 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

<input type="checkbox"/>	Name	Description	Date Created	Updated By	Size	Type
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Figure 26: CDF Reporting – No – 3

## Appendix A: Acronyms

Table 1: Acronyms

Acronym	Literal Translation
<b>HHQM</b>	Health Homes Quality Measure
<b>CDF</b>	Screening for Clinical Depression and Follow-Up Plan
<b>PRA</b>	Paper Reduction Act of 1995