



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

Medicaid and CHIP Program (MACPro)

AQM 2017 – Controlling High Blood Pressure (CBP) Core Measure PRA document

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1. Controlling High Blood Pressure (CBP) Core Measure Screenshots

1.1 Are you reporting on this measure?

The screenshot shows a web interface for the 'Controlling High Blood Pressure (CBP)' measure. At the top, there is a navigation bar with 'News', 'Tasks (3)', 'Records', 'Reports', and 'Actions' (highlighted). The Applan logo is in the top right. The main heading is 'Controlling High Blood Pressure (CBP)' with the ID 'CMS-10434 OMB 0938-1188'. Below this, it says 'Medicaid Adult Core Quality Measure - ZZ - 2017'. On the right, there are buttons for 'REQUEST TECHNICAL ASSISTANCE', 'CLEAR', and 'VIEW ALL RESPONSES', along with a 'Request System Help' link and a 'View Implementation Guide' link. The main question is 'Are you reporting on this measure?' with radio buttons for 'Yes' (selected) and 'No'.

Figure 1: Are you reporting on this measure?

1.2 Measurement Specification – Path 1

The screenshot shows the 'Measurement Specification' section for Path 1. It has a title 'Measurement Specification' and a collapse icon '+/-'. There are two radio buttons: 'National Committee for Quality Assurance (NCQA) / Healthcare Effectiveness Data and Information Set (HEDIS)' (selected) and 'Other'. To the right, there is a dropdown menu labeled 'Specify version of HEDIS used *' with '2017' selected. Below the dropdown, it says 'HEDIS: Healthcare Effectiveness Data and Information Set'.

Figure 2: Measurement Specification – Path 1

1.3 Measurement Specification – Path 2

The screenshot shows the 'Measurement Specification' section for Path 2. It has a title 'Measurement Specification' and a collapse icon '+/-'. There are two radio buttons: 'National Committee for Quality Assurance (NCQA) / Healthcare Effectiveness Data and Information Set (HEDIS)' and 'Other' (selected). To the right, there is a text area labeled 'Explain *' with a collapse icon '+/-'.

Figure 3: Measurement Specification – Path 2

1.4 Data Source

Data Source +/-

Hybrid (Administrative and Medical Records Data)

From where is the Administrative Data coming?
 Must select one or more
 Medicaid Management Information System (MMIS)
 Other

* Specify

From where is the Medical Records coming?
 Must select only one
 Electronic Health Record (EHR) Data
 Paper
 Both (EHR and Paper)

Specify*

Other

Figure 4: Data Source

1.5 Performance Measure

Performance Measure +/-

The percentage of Medicaid beneficiaries ages 18 to 85 who had a diagnosis of hypertension (HTN) and whose blood pressure (BP) was adequately controlled during the measurement year based on the following criteria.

- Beneficiaries ages 18 to 59 whose BP was <140/90 mm Hg
- Beneficiaries ages 60 to 85 with a diagnosis of diabetes whose BP was <140/90 mm Hg
- Beneficiaries ages 60 to 85 without a diagnosis of diabetes whose BP was <150/90 mm Hg

Enter rate values to one decimal place (XX.X). If your rate ends in .0, note that the .0 will not be retained on the screen and the whole number will be displayed instead.

Age Range: 18-64

Numerator	Denominator	Rate
10	20	5

Age Range: 65-85

Numerator	Denominator	Rate
1	2	5

The option "Denominator includes Medicare and Medicaid Dually-Eligible population" was not selected in the "Definition of Population Included in the Measure." Is the Medicare and Medicaid Dually-Eligible population included in this denominator?

Yes
 No

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

Character count: 0/4000

Figure 5: Performance Measure

1.6 Deviations from Measurement Specifications

Deviations from Measurement 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: 18-64

- Numerator

Explain *

- Denominator

Explain *

- Other

Explain *

Age Range: 65-85

- Numerator

Explain *

- Denominator

Explain *

- Other

Explain *

Figure 6: Deviations from Measurement Specifications

1.7 Optional Measure Stratification

Note: Same N/D/R sets are displayed under each of the stratification categories

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.

Enter rate values to one decimal place (XX.X). If your rate ends in .0, note that the .0 will not be retained on the screen and the whole number will be displayed instead.

Check all that apply

- Race (Non-Hispanic)
 - White

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 18-64	10	20	5	Clear Row
Age Range: 65-85	10	20	5	Clear Row

+ Additional/Alternative Classification/Sub-category

- Black or African American
- American Indian or Alaska Native
- Asian
- Native Hawaiian or Other Pacific Islander
- + Additional Race(s)

- Ethnicity
 - Hispanic or Latino
 - Not Hispanic or Latino
 - + Additional Ethnicity(ies)

- Sex
 - Male
 - Female

- Primary Spoken Language
 - English
 - Spanish
 - + Additional Primary Spoken Language(s)

- Disability Status
 - SSI
 - Non-SSI
 - + Additional Disability Status(es)

- Geography
 - Urban
 - Rural
 - + Additional Geographies

- Adult Eligibility Group (ACA Expansion Group)

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 18-64	10	20	6	Clear Row
Age Range: 65-85	5	10	2	Clear Row

+ Additional/Alternative Classification/Sub-category

Figure 7: Optional Measure Stratification

Appendix A: Acronyms

Table 1: Acronyms

Acronym	Definition
AQM	Adult Quality Measures
PRA	Paperwork Reduction Act of 1995