



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

Medicaid and CHIP Program (MACPro)

AQM 2017 – Screening for Clinical Depression and Follow-Up Plan (CDF) Core Measure PRA document

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1. Screening for Clinical Depression and Follow-Up Plan (CDF) Core Measure Screenshots

1.1 Are you reporting on this measure

The screenshot shows a web form titled "Screening for Clinical Depression and Follow-Up Plan (CDF)" with the identifier "CMS-10434 OMB 0938-1188". Below the title is "Medicaid Adult Core Quality Measure - ZZ - 2017". On the right side, there are three buttons: "REQUEST TECHNICAL ASSISTANCE", "CLEAR", and "VIEW ALL RESPONSES". Above the "VIEW ALL RESPONSES" button is a link for "Request System Help". Below the buttons is a link for "View Implementation Guide". The main question is "Are you reporting on this measure? *", with two radio button options: "Yes" (which is selected) and "No".

Figure 1: Are you reporting on this measure

1.2 Measurement Specification – Path 1

The screenshot shows a "Measurement Specification" form. It has a title "Measurement Specification" and a collapse icon "+/-" on the right. Below the title are two radio button options: "Centers for Medicare and Medicaid Services (CMS)" (which is selected) and "Other".

Figure 2: Measurement Specification – Path 1

1.3 Measurement Specification – Path 2

The screenshot shows a "Measurement Specification" form. It has a title "Measurement Specification" and a collapse icon "+/-" on the right. Below the title are two radio button options: "Centers for Medicare and Medicaid Services (CMS)" and "Other" (which is selected). To the right of the "Other" option is a text input field labeled "Explain *".

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 age 18 and older screened for clinical depression on the date of the 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.

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	230	5

Age Range: 65 and Older

Numerator	Denominator	Rate
50	100	50

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 and Older

- 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 and Older	50	200	10	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	5	Clear Row
Age Range: 65 and Older	20	40	10	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