



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

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

# **CQM 2018 - CLABSI-CH: Pediatric Central Line- Associated Blood Stream Infections Core Measure PRA Document**

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# 1. CLABSI-CH: Pediatric Central Line-Associated Blood Stream Infections Screenshots

## 1.1 Header

**Pediatric Central Line-Associated Bloodstream Infections (CLABSI-CH)**

CMS-10434 OMB 0938-1188

**Medicaid and CHIP Child Core Quality Measures - PA - 2018**

[Request System Help](#)

Because the data for this measure are collected by hospitals and are not readily available to states, CMS plans to obtain data to calculate this measure from the National Healthcare Safety Network. Thus, states do not need to report this measure.

[REQUEST TECHNICAL ASSISTANCE](#)

[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 Source Not Easily Accessible

*Select all that apply*

Requires Medical Record Review

Requires Data Linkage which does not currently exist

Other

**Explain**

Information Not Collected

*Select all that apply*

Not Collected by Provider (Hospital/Health Plan)

Other

**Explain**

Other

**Explain**

Small Sample Size (less than 30)

**Enter Specific Sample Size**

Other

**Explain Other Reason Why Data Not Reported**

Figure 1: Header for “Read Only”

## 1.2 Measurement Specifications

News Tasks (13) Records Reports **Actions** Appian

### Measurement Specification +/-

Centers for Disease Control and Prevention (CDC)

Other

Please describe the specifications that were used to calculate the measure and explain how they deviated from Core Set specifications. If you need additional space to describe your state's methodology, please attach a document to this report in the Report Documents section at the bottom of the screen.

Figure 2: Measurement Specifications

## 1.3 Data Source

News Tasks (13) Records Reports **Actions** Appian

### Data Source Collapse

Medical records (CDC's National Healthcare Safety Network)

Figure 3: Data Source

## 1.4 Date Range

News Tasks (13) Records Reports **Actions** Appian

### Date Range Collapse

For all measures, states should report start and end dates for the measurement period. For some measures, the specifications require a "look-back period" before or after the measurement period to determine eligibility or utilization. The measurement period entered in the Start and End Date fields should not include the "look-back period."

**Start Date**  **End Date**

Format should be mm/yyyy

Figure 4: Date Range

# 1.5 Definition of Population Included in the Measure

Definition of Population Included in the Measure

Collapse

**Definition of Denominator**

Denominator includes CHIP (Title XXI) population only  
 Denominator includes Medicaid (Title XIX) population only  
 Denominator includes CHIP and Medicaid (Title XIX)

**If the denominator is a subset of the definition selected above, please further define the denominator, and indicate the number of children excluded**

**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**

**Which delivery systems are represented in the Denominator? \***

Select all delivery systems that apply in your state (must select at least one); for each delivery system selected, enter the percentage of the measure-eligible population represented by that service delivery system. For example, if the measure-eligible population represents all managed care enrollees, enter 100 percent for MCO.

Fee-for-Service

Primary Care Case Management (PCCM)

Managed Care Organization / Pre-paid Inpatient Health Plan (MCO / PIHP)

Integrated Care Models (ICM)

Other

**Percentage of total state FFS population represented**

The percentage provided here should represent the percentage of the denominator population(s) included in the measure (i.e., Medicaid, CHIP, etc.) that receives items/services through the selected delivery system. For example, if the population included in the reported data represents all managed care enrollees and half of your state's fee-for-service enrollees, select managed care and enter 100, and select fee-for-service and enter 50.

**Percentage of total state PCCM population represented**

The percentage provided here should represent the percentage of the denominator population(s) included in the measure (i.e., Medicaid, CHIP, etc.) that receives items/services through the selected delivery system. For example, if the population included in the reported data represents all managed care enrollees and half of your state's fee-for-service enrollees, select managed care and enter 100, and select fee-for-service and enter 50.

**Number of Health Plans**

**Percentage of total state MCO/PIHP population represented**

The percentage provided here should represent the percentage of the denominator population(s) included in the measure (i.e., Medicaid, CHIP, etc.) that receives items/services through the selected delivery system. For example, if the population included in the reported data represents all managed care enrollees and half of your state's fee-for-service enrollees, select managed care and enter 100, and select fee-for-service and enter 50.

**Percentage of total state ICM population represented**

The percentage provided here should represent the percentage of the denominator population(s) included in the measure (i.e., Medicaid, CHIP, etc.) that receives items/services through the selected delivery system. For example, if the population included in the reported data represents all managed care enrollees and half of your state's fee-for-service enrollees, select managed care and enter 100, and select fee-for-service and enter 50.

**Describe**

**Percentage of total other population represented**

The percentage provided here should represent the percentage of the denominator population(s) included in the measure (i.e., Medicaid, CHIP, etc.) that receives items/services through the selected delivery system. For example, if the population included in the reported data represents all managed care enrollees and half of your state's fee-for-service enrollees, select managed care and enter 100, and select fee-for-service and enter 50.

**If applicable, list the number of Health Plans represented**

**Figure 5: Definition of Population Included in the Measure**

# 1.6 Performance Measure

**Performance Measure** +/-

The Standardized Infection Ratio (SIR) of central line-associated bloodstream infections (CLABSI) in pediatric and neonatal intensive care units (ICUs).

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.

**Pediatric Intensive Care Unit**

Numerator	Denominator	Rate

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

**Neonatal Intensive Care Unit**

Numerator	Denominator	Rate

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

Figure 6: Performance Measure

# 1.7 Deviations from Measure Specification

**Deviations from Measure Specifications** Collapse

Did your calculation of the measure deviate from the measure specification in any way?  
 Yes  
 No

Please select and explain the deviation(s)

**Pediatric Intensive Care Unit**

Numerator Explain

Denominator Explain

Other Explain

**Neonatal Intensive Care Unit**

Numerator Explain

Denominator Explain

Other Explain

Figure 7: Deviations from Measure Specification



## 1.8 Other Performance Measure

News Tasks (13) Records Reports **Actions**

Appian

### Other Performance Measure

Collapse

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.

**Please describe the other methodology used**

Please describe the rate (e.g., 18-64)

	Numerator	Denominator	Rate

Figure 8: Other Performance Measure

## 1.9 Combined Rate(s) from Multiple Reporting Units

News Tasks (13) Records Reports **Actions**

Appian

### Combined Rate(s) from Multiple Reporting Units

Collapse

**Did you Combine Rates from Multiple Reporting Units (e.g., health plans, delivery systems, programs) to Create a State-Level Rate?**

Yes

No

**If yes, indicate whether the state-level rate is weighted**

Must select one

The rates are weighted based on the size of the measure-eligible population for each reporting unit

The rates are weighted based on another weighting factor

**Describe the other weighting factor:**

The rates are not weighted

Figure 9: Combined Rate(s) from Multiple Reporting Units

## 1.10 Additional Notes/Comments on Measure (Optional)

Figure 10: Additional Notes/Comments on Measure (Optional)

## 1.11 Optional Measure Stratification – Screenshot 1, 2, 3, 4, 5

**Optional Measure Stratification** Collapse

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
Pediatric Intensive Care Unit			
Neonatal Intensive Care Unit			

Black or African American

Classification/Sub-category	Numerator	Denominator	Rate
Pediatric Intensive Care Unit			
Neonatal Intensive Care Unit			

American Indian or Alaska Native

Figure 11: Optional Measure Stratification – Screenshot 1

Classification/Sub-category	Numerator	Denominator	Rate
Pediatric Intensive Care Unit			
Neonatal Intensive Care Unit			
<input type="checkbox"/> Asian			

  

Classification/Sub-category	Numerator	Denominator	Rate
Pediatric Intensive Care Unit			
Neonatal Intensive Care Unit			
<input type="checkbox"/> Native Hawaiian or Other Pacific Islander			

  

Classification/Sub-category	Numerator	Denominator	Rate
Pediatric Intensive Care Unit			
Neonatal Intensive Care Unit			
<input type="checkbox"/> Ethnicity			
<input type="checkbox"/> Hispanic or Latino			

**Figure 12: Optional Measure Stratification – Screenshot 2**

Classification/Sub-category	Numerator	Denominator	Rate
Pediatric Intensive Care Unit			
Neonatal Intensive Care Unit			
<input type="checkbox"/> Not Hispanic or Latino			

  

Classification/Sub-category	Numerator	Denominator	Rate
Pediatric Intensive Care Unit			
Neonatal Intensive Care Unit			
<input type="checkbox"/> Sex			
<input type="checkbox"/> Male			

  

Classification/Sub-category	Numerator	Denominator	Rate
Pediatric Intensive Care Unit			
Neonatal Intensive Care Unit			
<input type="checkbox"/> Female			

**Figure 13: Optional Measure Stratification – Screenshot 3**

Classification/Sub-category	Numerator	Denominator	Rate
Pediatric Intensive Care Unit			
Neonatal Intensive Care Unit			

Primary Spoken Language

English

Classification/Sub-category	Numerator	Denominator	Rate
Pediatric Intensive Care Unit			
Neonatal Intensive Care Unit			

Spanish

Classification/Sub-category	Numerator	Denominator	Rate
Pediatric Intensive Care Unit			
Neonatal Intensive Care Unit			

Disability Status

SSI

**Figure 14: Optional Measure Stratification – Screenshot 4**

Classification/Sub-category	Numerator	Denominator	Rate
Pediatric Intensive Care Unit			
Neonatal Intensive Care Unit			

Non-SSI

Classification/Sub-category	Numerator	Denominator	Rate
Pediatric Intensive Care Unit			
Neonatal Intensive Care Unit			

Geography

Urban

Classification/Sub-category	Numerator	Denominator	Rate
Pediatric Intensive Care Unit			
Neonatal Intensive Care Unit			

Rural

Classification/Sub-category	Numerator	Denominator	Rate
Pediatric Intensive Care Unit			
Neonatal Intensive Care Unit			

**Figure 15: Optional Measure Stratification – Screenshot 5**

## Appendix A: Acronyms

Table 1: Acronyms

Acronym	Definition
<b>CQM</b>	Child Quality Measures
<b>PRA</b>	Paperwork Reduction Act of 1995