



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

Medicaid and CHIP Program (MACPro)
CQM - Definition of Population PRA document

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1. Definition of Population – Screenshots

Note: This section is applicable to all core measures except the following: “Consumer Assessment of Healthcare Providers and Systems® (CAHPS) Health Plan Survey 5.0H - Child Version Including Medicaid and Children with Chronic Conditions Supplemental Items (CPC)” and “State-Specific Measures”. This section will be available in read-only format for the following core measures: “Pediatric Central Line-Associated Blood Stream Infections (CLABSI)” and “Percentage of Eligibles Who Received Preventive Dental Services (PDENT).”

1.1 Definition of Population

Definition of Population Included in the Measure +/-

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 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?

Figure 1: Definition of Population - 1

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

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.

Primary Care Case Management (PCCM)

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.

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

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.

Figure 2: Definition of Population – 2

Integrated Care Models (ICM)

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.

Other

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 3: Definition of Population – 3

Appendix A: Acronyms

Table 1: Acronyms

Acronym	Literal Translation
CQM	Child Quality Measures
PRA	Paper Reduction Act of 1995