

Data Reporting Templates for Behavioral Health Clinic Quality Measures

Quality Measures Data Reporting Instructions

These templates are to be used to report the set of Behavioral Health Clinic (BHCs) quality measures. For the Section 223 Demonstration Program for Certified Community Behavioral Health Clinics (CCBHCs), states are required to report all measures to Substance Abuse and Mental Health Services Administration (SAMHSA), including those performance measures that are reported by the clinics to the part of the CCBHC Demonstration Program. Users are referred to the Technical Specifications and Resource Manual for additional detailed instructions regarding each measure as well as general instructions for the set as a whole.

These measures are specified at the clinic level. Some of the measures are drawn from established specified measures and others are not; those derived from existing measures have been respecified to the clinic level unless they were already specified at the program level.

Organization:

The templates are divided into 4 parts: 1) BHC-Lead Measures Required for the CCBHC Demonstration; 2) BHC-Lead Measures Not Required for the CCBHC Demonstration; 3) State-Lead Measures Required for the CCBHC Demonstration; and 4) State-Lead Measures Not Required for the CCBHC Demonstration, followed by a roll-up sheet and a sheet related to CCBHC measurement periods.

Data Issues:

Although states may not be accustomed to reporting data or measures with small denominators, for the CCBHC Demonstration all required measures must be reported. Those with denominators less than 30 will not be used for Quality Bonus Payment or publicly reported, but will be considered in the evaluation and should be treated by the CCBHCs and states as information for internal quality improvement.

Data used for reporting should be final.

Optional Measure Stratification:

This reporting template includes only the stratification required by the measure specification. If states wish to designate other stratification categories in addition to those specified, the reporter (clinic or state) may add additional stratification groups provided they encompass the specified stratification and are reported separately from the rates required by the specifications. States should be in mind that, if they require reporting of additional stratification categories, the numbers may not be sufficiently large to be meaningful. For reporting of any other stratification categories, provide the results in Section F Additional Notes.

Case Load Characteristics Instructions:

A table is provided for reporting numbers and percentages of the population of BHC consumers who fall into different categories. Information is being requested for the Section 223 evaluation. States may elect to require additional information. The spreadsheet is formatted to automatically calculate the percentages once numbers are entered.

A CCBHC consumer is anyone who has an enumerated visit at the clinic during the demonstration year.

Ethnicity and race are reported separately. For each consumer, both ethnicity and race should be reported.

Section-by-Section Instructions for Measure Templates:

A. Measurement Year: Insert the Measurement Year. For CCBHCs, the measurement year will be the demonstration year (DY) with DY1 running from the date when the demonstration services begin. For other purposes, the measurement year typically is a calendar year (e.g., MY2017).

B. Data Source: With the exception of the PEC, Y/FEC, and HOU measures, there are three potential data sources: (1) administrative (claims data/encounter records); (2) medical records (typically electronic health records (EHR), registries, and/or paper records); and (3) hybrid (a combination of (1) and (2)). Each measure is specified for one of these data sources and the corresponding reporting instructions indicate which it is. The template for a measure will ask if you used the specified data source. If the answer is yes, further information about that data source is requested. If the answer is "Other," information about the non-specified data source is required.

C. Date Range (mm/dd/yyyy): Define the date range for the reporting period based on the “Start” time period as the month, year that corresponds to the beginning period in which utilization took place and report the “End” time period as the month, year that corresponds to the end period in which utilization took place (for the denominator and numerator separately). If a measure reports utilization of services during the measurement year and prior year(s) (the “look-back period”), the full measurement period utilization should be reported in the Date Range. Do not report the year in which data were collected, or the version of HEDIS used to calculate the measure, if it is a HEDIS-derived measure. If reporting on a CCBHC, please see Appendix A of the technical specifications and the final two worksheets (Measurement Periods) for help in calculating appropriate measurement periods.

D. Performance Measure: The measure is described. A table is then provided for the reporter to insert the numerator and denominator. The rate for each stratification and the total are automatically calculated. All numbers provided are rounded to the second decimal place (e.g., denominator = 550.37894 = 550.38; 550.37443 = 550.37).

E. Adherence to Measure Specifications: This section, first, provides a space to identify the population included in the denominator and then addresses adherence to the specifications. Reporters are expected to follow the specifications. If, for any reason, there is a deviation from those specifications, this section provides a place to so indicate. Examples of deviations include: coding issues (numerator); different age groups (denominator), definition of continuous enrollment (denominator); start/end dates; data source. If a deviation is indicated, the reporter first must indicate if the denominator represents the total measure eligible population as specified in the technical specifications for this measure. If not, a description of excluded populations must be provided, as well as the size of the denominator used and the size of the actual eligible population as specified. Additionally, the reporter is asked to provide the numerator, denominator, and any other changes for each stratification specified for the measure (e.g., by age, payer status).

F. Additional Notes: Space is provided for the reporter to provide any additional information they feel is important. Please use this space to provide further explanations of any aspects of your state's reporting for the measure. Examples of such information include: context about why a data field cannot be reported; a change in the state's methodology, population, or program that would affect the trendability of the measure; sampling approach used for hybrid measures; indication of external quality review or state validation, if applicable.

Roll-up Report Instructions:

A table is provided to summarize the results of each measure. The contents are automatically inserted from the measure worksheets.

BHC-Lead Measures Required for the CCBHC Demonstration Program	
State Name:	
BHC Name:	
BHC Identifier:	

Case Load Characteristics		
Characteristic	Number	Percent
Age		
0-11 years		
12-17 years		
18-64 years		
65+ years		
Gender		
Women		
Men		
Other		
Unknown		
Ethnicity		
Not Hispanic or Latino		
Hispanic or Latino		
Unknown		
Race		
White		
Black or African American		
American Indian or Alaskan Native		
Asian		
Native Hawaiian or Pacific Islander		
More than one Race		
Unknown		
Insurance Status		
Medicaid		
CHIP		
Medicare		
Medicare and Medicaid Dually-Eligible		
VHA/TRICARE		
Commercially insured		
Uninsured		
Other		

Veteran or Military Status		
Active Duty Military		
Prior Military Service/Veteran		
Neither		
Total Clinic Population		

Time to Initial Evaluation (I-EVAL)			
A SAMHSA-Developed Metric			
A. Measurement Year:			
Insert measurement year based on CCBHC or non-CCBHC status. For CCBHCs, enter DY1 or DY2. For non-CCBHCs, enter year such as FY2017.			
B. Data Source:			
Select the data source type (Medical Records or Other):		If medical records data, select source (EHR, Paper Records, Both):	
If other data source selected, specify source:			
C. Date Range:			
Denominator Start Date (mm/dd/yyyy)			
Denominator End Date (mm/dd/yyyy)			
Numerator Start Date (mm/dd/yyyy)			
Numerator End Date (mm/dd/yyyy)			
D. Performance Measure:			
Metric 1. The percentage of new consumers with initial evaluation provided within 10 business days of first contact			
Metric 2. The mean number of days until initial evaluation for new consumers			
These metrics are stratified to report by age (12-17 years, 18 years and older) and are stratified to report by Medicaid, Medicare & Medicaid, other, and total population.			
Metric #1: Percentage of New Clients with Initial Evaluation within 10 Business Days			
Measure	Numerator	Denominator	Rate
Age 12-17 years	0	0	
Medicaid			
Medicare & Medicaid			
Other			
Age 18+ years	0	0	
Medicaid			
Medicare & Medicaid			
Other			

Total (all Age Groups)	0	0	
Medicaid	0	0	
Medicare & Medicaid	0	0	
Other	0	0	
Metric #2: Mean Number of Days until Initial Evaluation			
Measure	Numerator	Denominator	Rate
Age 12-17 years	0	0	
Medicaid			
Medicare & Medicaid			
Other			
Age 18+ years	0	0	
Medicaid			
Medicare & Medicaid			
Other			
Total (all Age Groups)	0	0	
Medicaid	0	0	
Medicare & Medicaid	0	0	
Other	0	0	

E. Adherence to Measure Specifications:

Population included in the denominator (indicate yes or no for each of the options below):			
Medicaid population			
Title XIX-eligible CHIP population			
Title XXI-eligible CHIP population			
Other CHIP enrollees			
Medicare population			
Medicare and Medicaid Dually-Eligible population			
VHA/TRICARE population			
Commercially insured population			
Uninsured population			
Other		If Other, explain whether the denominator is a subset of definitions selected above, please further define the denominator, and indicate the number of consumers excluded:	
Did your calculation of the measure deviate from the measure specification in any way?		If Yes, the measure differs: Explain how the calculation differed and why.	
Does this denominator represent your total measure eligible population as defined by the Technical Specifications for this measure?		If No, the denominator doesn't represent your total eligible population, explain which populations are excluded and why in the next cell:	
Specify the size of the population included in the denominator:		Specify the size of the measure-eligible population:	
Provide the following information for each rate/stratification:			
For Metric #1: Percentage of New Clients with Initial Eval within 10 Business Days			
Age Range: 12-17 years			

Did the numerator differ for the 12-17 years age range?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the 12-17 years age range?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the 12-17 years age range?		If other, explain the deviation in the next cell:	
Age Range: 18+ years			
Did the numerator differ for the 18+ years age range?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the 18+ years age range?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the 18+ years age range?		If other, explain the deviation in the next cell:	
Medicaid Population:			
Did the numerator differ for the Medicaid population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the Medicaid population?		If denominator differs, explain the deviation in the next cell:	

Did the calculation differ in some other way for the Medicaid population?		If other, explain the deviation in the next cell:	
Medicare & Medicaid Population:			
Did the numerator differ for the Medicare & Medicaid population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the Medicare & Medicaid population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the Medicare & Medicaid population?		If other, explain the deviation in the next cell:	
Neither Medicaid nor Medicare & Medicaid Population:			
Did the numerator differ for the neither Medicaid nor Medicare & Medicaid population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the neither Medicaid nor Medicare & Medicaid population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the neither Medicaid nor Medicare & Medicaid population?		If other, explain the deviation in the next cell:	
Total Eligible Population:			
Did the numerator differ for the Total Eligible population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the Total Eligible population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the Total Eligible population?		If other, explain the deviation in the next cell:	
For Metric #2: Mean Number of Days until Initial Evaluation:			
Age Range: 12-17 years			

Did the numerator differ for the 12-17 years age range?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the 12-17 years age range?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the 12-17 years age range?		If other, explain the deviation in the next cell:	
Age Range: 18+ years			
Did the numerator differ for the 18+ years age range?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the 18+ years age range?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the 18+ years age range?		If other, explain the deviation in the next cell:	
Medicaid Population:			
Did the numerator differ for the Medicaid population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the Medicaid population?		If denominator differs, explain the deviation in the next cell:	

Did the calculation differ in some other way for the Medicaid population?		If other, explain the deviation in the next cell:	
Medicare & Medicaid Population:			
Did the numerator differ for the Medicare & Medicaid population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the Medicare & Medicaid population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the Medicare & Medicaid population?		If other, explain the deviation in the next cell:	
Neither Medicaid nor Medicare & Medicaid Population:			
Did the numerator differ for the neither Medicaid nor Medicare & Medicaid population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the neither Medicaid nor Medicare & Medicaid population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the neither Medicaid nor Medicare & Medicaid population?		If other, explain the deviation in the next cell:	
Total Eligible Population:			
Did the numerator differ for the Total Eligible population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the Total Eligible population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the Total Eligible population?		If other, explain the deviation in the next cell:	
F. Additional Notes:			

OMB 0938-1148
CMS-10398



Preventive Care and Screening: Adult Body Mass Index (BMI) Screening and Follow-Up (BMI-SF)

Based on a measure stewarded by the Centers for Medicare & Medicaid Services (NQF #0421, PQRS #128)

A. Measurement Year:

Insert measurement year based on CCBHC or non-CCBHC status. For CCBHCs, enter DY1 or DY2. For non-CCBHCs, enter year such as FY2017.

B. Data Source:

Select the data source type (Medical Records or Other):

If medical records data, select source (EHR, Paper Records, Both):

If other data source selected, specify source:

C. Date Range:

Denominator Start Date (mm/dd/yyyy)

Denominator End Date (mm/dd/yyyy)

Numerator Start Date (mm/dd/yyyy)

Numerator End Date (mm/dd/yyyy)

D. Performance Measure:

The percentage of consumers aged 18 years and older with a BMI documented during the current encounter or during the previous six months AND with a BMI outside of normal parameters, a follow-up plan is documented during the encounter or during the previous six months of the current encounter

Normal Parameters: Age 65 years and older BMI ≥ 23 and $< 30 \text{ kg/m}^2$, Age 18 - 64 years BMI ≥ 18.5 and $< 25 \text{ kg/m}^2$

The measure is stratified to report Medicaid, Medicare & Medicaid, other, and total population

Measure	Numerator	Denominator	Rate
Medicaid			
Medicare & Medicaid			
Other			
Total	0	0	

E. Adherence to Measure Specifications:

Population included in the denominator (indicate yes or no for each of the options below):			
Medicaid population			
Title XIX-eligible CHIP population			
Title XXI-eligible CHIP population			
Other CHIP enrollees			
Medicare population			
Medicare and Medicaid Dually-Eligible population			
VHA/TRICARE population			
Commercially insured population			
Uninsured population			
Other		If Other, explain whether the denominator is a subset of definitions selected above, please further define the denominator, and indicate the number of consumers excluded:	
Did your calculation of the measure deviate from the measure specification in any way?		If Yes, the measure differs: Explain how the calculation differed and why.	
Does this denominator represent your total measure eligible population as defined by the Technical Specifications for this measure?		If No, the denominator doesn't represent your total eligible population, explain which populations are excluded and why in the next cell:	
Specify the size of the population included in the denominator:		Specify the size of the measure-eligible population.	
Medicaid Population:			

Did the numerator differ for the Medicaid population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the Medicaid population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the Medicaid population?		If other, explain the deviation in the next cell:	
Medicare & Medicaid Population:			
Did the numerator differ for the Medicare & Medicaid population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the Medicare & Medicaid population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the Medicare & Medicaid population?		If other, explain the deviation in the next cell:	
Neither Medicaid nor Medicare & Medicaid Population:			
Did the numerator differ for the neither Medicaid nor Medicare & Medicaid population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the neither Medicaid nor Medicare & Medicaid population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the neither Medicaid nor Medicare & Medicaid population?		If other, explain the deviation in the next cell:	
Total Eligible Population:			
Did the numerator differ for the Total Eligible population?		If numerator differs, explain the deviation in the next cell:	

Did the denominator differ for the Total Eligible population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the Total Eligible population?		If other, explain the deviation in the next cell:	
F. Additional Notes:			

Weight Assessment for Children/Adolescents: Body Mass Index Assessment for Children/Adolescents (WCC-BH)

Based on a measure stewarded by the National Committee for Quality Assurance (NQF #0024, HEDIS 2016, Medicaid Child and Adolescent Core Set)

A. Measurement Year:

Insert measurement year based on CCBHC or non-CCBHC status. For CCBHCs, enter DY1 or DY2. For non-CCBHCs, enter year such as FY2017.

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B. Data Source:

Select the data source type:

If administrative data only, select source (Medicaid Management Information System (MMIS) or Other):

If hybrid data, select administrative data source (Medicaid Management Information System (MMIS) or Other):

If hybrid data, select medical records source (EHR, Paper Records, Both):

If hybrid data, what is the sample size?

If hybrid, what is the measure-eligible population?

If source other than administrative or hybrid selected, provide source:

If other administrative data, specify data source:

If other for administrative hybrid data, specify data source:

C. Date Range:

Denominator Start Date (mm/dd/yyyy)

Denominator End Date (mm/dd/yyyy)

Numerator Start Date (mm/dd/yyyy)

Numerator End Date (mm/dd/yyyy)

D. Performance Measure:

Percentage of children ages 3 to 17 who had an outpatient visit with a primary care practitioner (PCP) or obstetrical/ gynecological (OB/GYN) practitioner and who had evidence of body mass index (BMI) percentile documentation during the measurement year. Because BMI norms for youth vary with age and gender, this measure evaluates whether BMI percentile is assessed rather than the absolute BMI value.

The measure is stratified to report by age (3-11, 12-17, and total (all age groups)), and by the Medicaid, Medicare & Medicaid, and other population.

Measure	Numerator	Denominator	Rate
3-11 years			
Medicaid			
Medicare & Medicaid			
Other			
Total	0	0	
12-17 years			
Medicaid			
Medicare & Medicaid			
Other			
Total	0	0	

E. Adherence to Measure Specifications:

Population included in the denominator (indicate yes or no for each of the options below):	
Medicaid population	
Title XIX-eligible CHIP population	
Title XXI-eligible CHIP population	
Other CHIP enrollees	
Medicare population	
Medicare and Medicaid Dually-Eligible population	
VHA/TRICARE population	
Commercially insured population	
Uninsured population	

Other		If Other, explain whether the denominator is a subset of definitions selected above, please further define the denominator, and indicate the number of consumers excluded:	
Did your calculation of the measure deviate from the measure specification in any way?		If Yes, the measure differs: Explain how the calculation differed and why.	
Does this denominator represent your total measure eligible population as defined by the Technical Specifications for this measure?		If No, the denominator doesn't represent your total eligible population, explain which populations are excluded and why in the next cell:	
Specify the size of the population included in the denominator:		Specify the size of the measure-eligible population:	

Provide the following information for each rate/stratification:

Age Range: 3-11 years

Did the numerator differ for the 3-11 years age range?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the 3-11 years age range?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the 3-11 years age range?		If other, explain the deviation in the next cell:	

Age Range: 12-17 years

Did the numerator differ for the 12-17 years age range?		If numerator differs, explain the deviation in the next cell:	
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Did the denominator differ for the 12-17 years age range?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the 12-17 years age range?		If other, explain the deviation in the next cell:	
Medicaid Population:			
Did the numerator differ for the Medicaid population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the Medicaid population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the Medicaid population?		If other, explain the deviation in the next cell:	
Medicare & Medicaid Population:			
Did the numerator differ for the Medicare & Medicaid population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the Medicare & Medicaid population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the Medicare & Medicaid population?		If other, explain the deviation in the next cell:	
Neither Medicaid nor Medicare & Medicaid Population:			
Did the numerator differ for the neither Medicaid nor Medicare & Medicaid population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the neither Medicaid nor Medicare & Medicaid population?		If denominator differs, explain the deviation in the next cell:	

Did the calculation differ in some other way for the neither Medicaid nor Medicare & Medicaid population?		If other, explain the deviation in the next cell:	
Total Eligible Population:			
Did the numerator differ for the Total Eligible population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the Total Eligible population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the Total Eligible population?		If other, explain the deviation in the next cell:	

F. Additional Notes:

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Preventive Care & Screening: Tobacco Use: Screening & Cessation Intervention (TSC)

Based on a measure stewarded by the American Medical Association (AMA) and PCPI® Foundation (PCPI®) (NQF #0028, PQRS #226)

A. Measurement Year:

Insert measurement year based on CCBHC or non-CCBHC status. For CCBHCs, enter DY1 or DY2. For non-CCBHCs, enter year such as FY2017.

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B. Data Source:

Select the data source type (Medical Records or Other):

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If medical records data, select source (EHR, Paper Records, Both):

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If other data source selected, specify source:

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C. Date Range:

Denominator Start Date (mm/dd/yyyy)

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Denominator End Date (mm/dd/yyyy)

--

Numerator Start Date (mm/dd/yyyy)

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Numerator End Date (mm/dd/yyyy)

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D. Performance Measure:

Percentage of consumers aged 18 years and older who were screened for tobacco use one or more times within 24 months AND who received cessation counseling intervention if identified as a tobacco user

The measure is stratified to report Medicaid, Medicare & Medicaid, other, and total population.

Measure	Numerator	Denominator	Rate
Medicaid			
Medicare & Medicaid			
Other			
Total	0	0	

E. Adherence to Measure Specifications:

Population included in the denominator (indicate yes or no for each of the options below):

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Medicaid population			
Title XIX-eligible CHIP population			
Title XXI-eligible CHIP population			
Other CHIP enrollees			
Medicare population			
Medicare and Medicaid Dually-Eligible population			
VHA/TRICARE population			
Commercially insured population			
Uninsured population			
Other		If Other, explain whether the denominator is a subset of definitions selected above, please further define the denominator, and indicate the number of consumers excluded:	
Did your calculation of the measure deviate from the measure specification in any way?		If Yes, the measure differs: Explain how the calculation differed and why.	
Does this denominator represent your total measure eligible population as defined by the Technical Specifications for this measure?		If No, the denominator doesn't represent your total eligible population, explain which populations are excluded and why in the next cell:	
Specify the size of the population included in the denominator:		Specify the size of the measure-eligible population.	

Provide the following information for each rate/stratification:

Medicaid Population:			
Did the numerator differ for the Medicaid population?		If numerator differs, explain the deviation in the next cell:	

Did the denominator differ for the Medicaid population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the Medicaid population?		If other, explain the deviation in the next cell:	
Medicare & Medicaid Population:			
Did the numerator differ for the Medicare & Medicaid population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the Medicare & Medicaid population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the Medicare & Medicaid population?		If other, explain the deviation in the next cell:	
Neither Medicaid nor Medicare & Medicaid Population:			
Did the numerator differ for the neither Medicaid nor Medicare & Medicaid population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the neither Medicaid nor Medicare & Medicaid population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the neither Medicaid nor Medicare & Medicaid population?		If other, explain the deviation in the next cell:	
Total Eligible Population:			
Did the numerator differ for the Total Eligible population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the Total Eligible population?		If denominator differs, explain the deviation in the next cell:	

Did the calculation differ in some other way for the Total Eligible population?		If other, explain the deviation in the next cell:	
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F. Additional Notes:

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Preventive Care and Screening: Unhealthy Alcohol Use: Screening & Brief Counseling (ASC)

Based on a measure stewarded by the American Medical Association (AMA) and PCPI® Foundation (PCPI®) (NQF #2152, PQRS #431)

A. Measurement Year:

Insert measurement year based on CCBHC or non-CCBHC status. For CCBHCs, enter DY1 or DY2. For non-CCBHCs, enter year such as FY2017.		
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B. Data Source:

Select the data source type (Medical Records or Other):		If medical records data, select source (EHR, Paper Records, Both):	
If other data source selected, specify source:			

C. Date Range:

Denominator Start Date (mm/dd/yyyy)	
Denominator End Date (mm/dd/yyyy)	
Numerator Start Date (mm/dd/yyyy)	
Numerator End Date (mm/dd/yyyy)	

D. Performance Measure:

Percentage of consumers aged 18 years and older who were screened at least once within the last 24 months for unhealthy alcohol use using a systematic screening method AND who received brief counseling if identified as an unhealthy alcohol user.

The measure is stratified to report Medicaid, Medicare & Medicaid, other, and total population.

Measure	Numerator	Denominator	Rate
Medicaid			
Medicare & Medicaid			
Other			
Total	0	0	

E. Adherence to Measure Specifications:

Population included in the denominator (indicate yes or no for each of the options below):			
Medicaid population			
Title XIX-eligible CHIP population			
Title XXI-eligible CHIP population			
Other CHIP enrollees			
Medicare population			
Medicare and Medicaid Dually-Eligible population			
VHA/TRICARE population			
Commercially insured population			
Uninsured population			
Other		If Other, explain whether the denominator is a subset of definitions selected above, please further define the denominator, and indicate the number of consumers excluded:	
Did your calculation of the measure deviate from the measure specification in any way?		If Yes, the measure differs: Explain how the calculation differed and why.	
Does this denominator represent your total measure eligible population as defined by the Technical Specifications for this measure?		If No, the denominator doesn't represent your total eligible population, explain which populations are excluded and why in the next cell:	
Specify the size of the population included in the denominator:		Specify the size of the measure-eligible population.	

Provide the following information for each rate/stratification:

Medicaid Population:

Did the numerator differ for the Medicaid population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the Medicaid population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the Medicaid population?		If other, explain the deviation in the next cell:	
Medicare & Medicaid Population:			
Did the numerator differ for the Medicare & Medicaid population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the Medicare & Medicaid population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the Medicare & Medicaid population?		If other, explain the deviation in the next cell:	
Neither Medicaid nor Medicare & Medicaid Population:			
Did the numerator differ for the neither Medicaid nor Medicare & Medicaid population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the neither Medicaid nor Medicare & Medicaid population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the neither Medicaid nor Medicare & Medicaid population?		If other, explain the deviation in the next cell:	
Total Eligible Population:			

Did the numerator differ for the Total Eligible population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the Total Eligible population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the Total Eligible population?		If other, explain the deviation in the next cell:	

F. Additional Notes:

Child and Adolescent Major Depressive Disorder: Suicide Risk Assessment (SRA-BH-C)

Based on a measure stewarded by the American Medical Association (AMA) and PCPI® Foundation (PCPI®) (NQF #1365, Medicaid Child and Adolescent Core Set)

A. Measurement Year:

Insert measurement year based on CCBHC or non-CCBHC status. For CCBHCs, enter DY1 or DY2. For non-CCBHCs, enter year such as FY2017.

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B. Data Source:

Select the data source type (Medical Records or Other):

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If medical records data, select source (EHR, Paper Records, Both):

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If other data source selected, specify source:

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C. Date Range:

Denominator Start Date (mm/dd/yyyy)

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Denominator End Date (mm/dd/yyyy)

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Numerator Start Date (mm/dd/yyyy)

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Numerator End Date (mm/dd/yyyy)

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D. Performance Measure:

The percentage of consumer visits for those consumers aged 6 through 17 years with a diagnosis of Major Depressive Disorder (MDD) with an assessment for suicide risk

The measure is stratified to report Medicaid, Medicare & Medicaid, other, and total population.

Measure	Numerator	Denominator	Rate
Medicaid			
Medicare & Medicaid			
Other			
Total	0	0	

E. Adherence to Measure Specifications:

Population included in the denominator (indicate yes or no for each of the options below):

Medicaid population			
Title XIX-eligible CHIP population			
Title XXI-eligible CHIP population			
Other CHIP enrollees			
Medicare population			
Medicare and Medicaid Dually-Eligible population			
VHA/TRICARE population			
Commercially insured population			
Uninsured population			
Other		If Other, explain whether the denominator is a subset of definitions selected above, please further define the denominator, and indicate the number of consumers excluded:	
Did your calculation of the measure deviate from the measure specification in any way?		If Yes, the measure differs: Explain how the calculation differed and why.	
Does this denominator represent your total measure eligible population as defined by the Technical Specifications for this measure?		If No, the denominator doesn't represent your total eligible population, explain which populations are excluded and why in the next cell:	
Specify the size of the population included in the denominator:		Specify the size of the measure-eligible population.	
Provide the following information for each rate/stratification:			
Medicaid Population:			

Did the numerator differ for the Medicaid population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the Medicaid population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the Medicaid population?		If other, explain the deviation in the next cell:	
Medicare & Medicaid Population:			
Did the numerator differ for the Medicare & Medicaid population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the Medicare & Medicaid population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the Medicare & Medicaid population?		If other, explain the deviation in the next cell:	
Neither Medicaid nor Medicare & Medicaid Population:			
Did the numerator differ for the neither Medicaid nor Medicare & Medicaid population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the neither Medicaid nor Medicare & Medicaid population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the neither Medicaid nor Medicare & Medicaid population?		If other, explain the deviation in the next cell:	
Total Eligible Population:			

Did the numerator differ for the Total Eligible population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the Total Eligible population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the Total Eligible population?		If other, explain the deviation in the next cell:	
F. Additional Notes:			

Adult Major Depressive Disorder (MDD): Suicide Risk Assessment (SRA-A)

Based on a measure stewarded by the American Medical Association (AMA) and PCPI® Foundation (PCPI®) (NQF #0104)

A. Measurement Year:

Insert measurement year based on CCBHC or non-CCBHC status. For CCBHCs, enter DY1 or DY2. For non-CCBHCs, enter year such as FY2017.

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B. Data Source:

Select the data source type (Medical Records or Other):

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If medical records data, select source (EHR, Paper Records, Both):

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If other data source selected, specify source:

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C. Date Range:

Denominator Start Date (mm/dd/yyyy)

--

Denominator End Date (mm/dd/yyyy)

--

Numerator Start Date (mm/dd/yyyy)

--

Numerator End Date (mm/dd/yyyy)

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D. Performance Measure:

Percentage of consumers aged 18 years and older with a diagnosis of major depressive disorder (MDD) with a suicide risk assessment completed during the visit in which a new diagnosis or recurrent episode was identified

The measure is stratified to report Medicaid, Medicare & Medicaid, other, and total population.

Measure	Numerator	Denominator	Rate
Medicaid			
Medicare & Medicaid			
Other			
Total	0	0	

E. Adherence to Measure Specifications:

Population included in the denominator (indicate yes or no for each of the options below):

Medicaid population	
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Title XIX-eligible CHIP population			
Title XXI-eligible CHIP population			
Other CHIP enrollees			
Medicare population			
Medicare and Medicaid Dually-Eligible population			
VHA/TRICARE population			
Commercially insured population			
Uninsured population			
Other		If Other, explain whether the denominator is a subset of definitions selected above, please further define the denominator, and indicate the number of consumers excluded:	
Did your calculation of the measure deviate from the measure specification in any way?		If Yes, the measure differs: Explain how the calculation differed and why.	
Does this denominator represent your total measure eligible population as defined by the Technical Specifications for this measure?		If No, the denominator doesn't represent your total eligible population, explain which populations are excluded and why in the next cell:	
Specify the size of the population included in the denominator:		Specify the size of the measure-eligible population.	

Provide the following information for each rate/stratification:

Medicaid Population:			
Did the numerator differ for the Medicaid population?		If numerator differs, explain the deviation in the next cell:	

Did the denominator differ for the Medicaid population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the Medicaid population?		If other, explain the deviation in the next cell:	
Medicare & Medicaid Population:			
Did the numerator differ for the Medicare & Medicaid population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the Medicare & Medicaid population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the Medicare & Medicaid population?		If other, explain the deviation in the next cell:	
Neither Medicaid nor Medicare & Medicaid Population:			
Did the numerator differ for the neither Medicaid nor Medicare & Medicaid population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the neither Medicaid nor Medicare & Medicaid population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the neither Medicaid nor Medicare & Medicaid population?		If other, explain the deviation in the next cell:	
Total Eligible Population:			
Did the numerator differ for the Total Eligible population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the Total Eligible population?		If denominator differs, explain the deviation in the next cell:	

Did the calculation differ in some other way for the Total Eligible population?		If other, explain the deviation in the next cell:	
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F. Additional Notes:

Screening for Clinical Depression and Follow-up Plan (CDF-BH)

Based on a measure stewarded by the Centers for Medicare & Medicaid Services (NQF #0418, Medicaid Adult Core Set)

A. Measurement Year:

Insert measurement year based on CCBHC or non-CCBHC status. For CCBHCs, enter DY1 or DY2. For non-CCBHCs, enter year such as FY2017.	
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B. Data Source:

Select the data source type:		
If hybrid data, select administrative data source (Medicaid Management Information System (MMIS) or Other):		If other hybrid data, specify data source:
If hybrid data, select medical records source (EHR, Paper Records, Both):		
If hybrid data, what is the sample size?		
If Hybrid, what is the measure-eligible population?		
If source other than hybrid selected, provide source:		

C. Date Range:

Denominator Start Date (mm/dd/yyyy)	
Denominator End Date (mm/dd/yyyy)	
Numerator Start Date (mm/dd/yyyy)	
Numerator End Date (mm/dd/yyyy)	

D. Performance Measure:

Percentage of consumers aged 12 years 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

The measure is stratified to report by age (12-17, 18-64, 65 and older), and by the Medicaid, Medicare & Medicaid, and other population.

Measure	Numerator	Denominator	Rate
12-17 years	0	0	
Medicaid			
Medicare & Medicaid			
Other			
18-64 years	0	0	
Medicaid			
Medicare & Medicaid			
Other			
65+ years	0	0	
Medicaid			
Medicare & Medicaid			
Other			

E. Adherence to Measure Specifications:

Population included in the denominator (indicate yes or no for each of the options below):		
Medicaid population		
Title XIX-eligible CHIP population		
Title XXI-eligible CHIP population		
Other CHIP enrollees		
Medicare population		
Medicare and Medicaid Dually-Eligible population		
VHA/TRICARE population		
Commercially insured population		
Uninsured population		

Other		If Other, explain whether the denominator is a subset of definitions selected above, please further define the denominator, and indicate the number of consumers excluded:	
Did your calculation of the measure deviate from the measure specification in any way?		If Yes, the measure differs: Explain how the calculation differed and why.	
Does this denominator represent your total measure eligible population as defined by the Technical Specifications for this measure?		If No, the denominator doesn't represent your total eligible population, explain which populations are excluded and why in the next cell:	
Specify the size of the population included in the denominator:		Specify the size of the measure-eligible population.	

Provide the following information for each rate/stratification:

Age Range: 12-17 years			
Did the numerator differ for the 12-17 years age range?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the 12-17 years age range?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the 12-17 years age range?		If other, explain the deviation in the next cell:	

Age Range: 18-64 years

Did the numerator differ for the 18-64 years age range?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the 18-64 years age range?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the 18-64 years age range?		If other, explain the deviation in the next cell:	

Age Range: 65+ years

Did the numerator differ for the 65+ years age range?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the 65+ years age range?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the 65+ years age range?		If other, explain the deviation in the next cell:	

Medicaid Population:

Did the numerator differ for the Medicaid population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the Medicaid population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the Medicaid population?		If other, explain the deviation in the next cell:	

Medicare & Medicaid Population:

Did the numerator differ for the Medicare & Medicaid population?		If numerator differs, explain the deviation in the next cell:	
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Did the denominator differ for the Medicare & Medicaid population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the Medicare & Medicaid population?		If other, explain the deviation in the next cell:	
Neither Medicaid nor Medicare & Medicaid Population:			
Did the numerator differ for the neither Medicaid nor Medicare & Medicaid population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the neither Medicaid nor Medicare & Medicaid population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the neither Medicaid nor Medicare & Medicaid population?		If other, explain the deviation in the next cell:	

F. Additional Notes:

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Depression Remission at Twelve Months (DEP-REM-12)

Based on a measure stewarded by Minnesota Community Measurement (NQF #0710)

A. Measurement Year:

Insert measurement year based on CCBHC or non-CCBHC status. For CCBHCs, enter DY1 or DY2. For non-CCBHCs, enter year such as FY2017.

B. Data Source:

Select the data source type (Medical Records or Other):

If medical records data, select source (EHR, Paper Records, Both):

If other data source selected, specify source:

C. Date Range:

Denominator Start Date (mm/dd/yyyy)

Denominator End Date (mm/dd/yyyy)

Numerator Start Date (mm/dd/yyyy)

Numerator End Date (mm/dd/yyyy)

D. Performance Measure:

Adult consumers 18 years of age or older with Major Depression or Dysthymia who reached remission 12 months (\pm 30 days) after an index visit. This measure applies to consumers with both newly diagnosed and existing Depression whose current PHQ-9 score indicates a need for treatment.

The measure is stratified to report Medicaid, Medicare & Medicaid, other, and total population.

Measure	Numerator	Denominator	Rate
Medicaid			
Medicare & Medicaid			
Other			
Total	0	0	

E. Adherence to Measure Specifications:

Population included in the denominator (indicate yes or no for each of the options below):

Medicaid population			
Title XIX-eligible CHIP population			
Title XXI-eligible CHIP population			
Other CHIP enrollees			
Medicare population			
Medicare and Medicaid Dually-Eligible population			
VHA/TRICARE population			
Commercially insured population			
Uninsured population			
Other		If Other, explain whether the denominator is a subset of definitions selected above, please further define the denominator, and indicate the number of consumers excluded:	
Did your calculation of the measure deviate from the measure specification in any way?		If Yes, the measure differs: Explain how the calculation differed and why.	
Does this denominator represent your total measure eligible population as defined by the Technical Specifications for this measure?		If No, the denominator doesn't represent your total eligible population, explain which populations are excluded and why in the next cell:	
Specify the size of the population included in the denominator:		Specify the size of the measure-eligible population.	

Provide the following information for each rate/stratification:

Medicaid Population:

Did the numerator differ for the Medicaid population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the Medicaid population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the Medicaid population?		If other, explain the deviation in the next cell:	
Medicare & Medicaid Population:			
Did the numerator differ for the Medicare & Medicaid population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the Medicare & Medicaid population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the Medicare & Medicaid population?		If other, explain the deviation in the next cell:	
Neither Medicaid nor Medicare & Medicaid Population:			
Did the numerator differ for the neither Medicaid nor Medicare & Medicaid population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the neither Medicaid nor Medicare & Medicaid population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the neither Medicaid nor Medicare & Medicaid population?		If other, explain the deviation in the next cell:	
Total Eligible Population:			
Did the numerator differ for the Total Eligible population?		If numerator differs, explain the deviation in the next cell:	

Did the denominator differ for the Total Eligible population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the Total Eligible population?		If other, explain the deviation in the next cell:	

F. Additional Notes:

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Other BHC-Lead Measures Not Required for the CCBHC Demonstration Program

State Name:	
BHC Name:	
BHC Identifier:	

Routine Care Needs (ROUT)

A SAMHSA-Developed Metric

A. Measurement Year:

Insert measurement year based on CCBHC or non-CCBHC status. For CCBHCs, enter DY1 or DY2. For non-CCBHCs, enter year such as FY2017.

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B. Data Source:

Select the data source type (Medical Records or Other):

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If medical records data, select source (EHR, Paper Records, Both):

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If other data source selected, specify source:

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C. Date Range:

Denominator Start Date (mm/dd/yyyy)

--

Denominator End Date (mm/dd/yyyy)

--

Numerator Start Date (mm/dd/yyyy)

--

Numerator End Date (mm/dd/yyyy)

--

D. Performance Measure:

Percentage of new consumers requesting services who were determined to need routine care

The measure is stratified to report Medicaid, Medicare & Medicaid, other, and total population.

Measure	Numerator	Denominator	Rate
Medicaid			
Medicare & Medicaid			
Other			
Total		0	0

E. Adherence to Measure Specifications:

Population included in the denominator (indicate yes or no for each of the options below):

Medicaid population	
Title XIX-eligible CHIP population	
Title XXI-eligible CHIP population	
Other CHIP enrollees	
Medicare population	

Medicare and Medicaid Dually-Eligible population			
VHA/TRICARE population			
Commercially insured population			
Uninsured population			
Other		If Other, explain whether the denominator is a subset of definitions selected above, please further define the denominator, and indicate the number of consumers excluded:	
Did your calculation of the measure deviate from the measure specification in any way?		If Yes, the measure differs: Explain how the calculation differed and why.	
Does this denominator represent your total measure eligible population as defined by the Technical Specifications for this measure?		If No, the denominator doesn't represent your total eligible population, explain which populations are excluded and why in the next cell:	
Specify the size of the population included in the denominator:		Specify the size of the measure-eligible population.	

Provide the following information for each rate/stratification:

Medicaid Population:			
Did the numerator differ for the Medicaid population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the Medicaid population?		If denominator differs, explain the deviation in the next cell:	

Did the calculation differ in some other way for the Medicaid population?		If other, explain the deviation in the next cell:	
Medicare & Medicaid Population:			
Did the numerator differ for the Medicare & Medicaid population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the Medicare & Medicaid population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the Medicare & Medicaid population?		If other, explain the deviation in the next cell:	
Neither Medicaid nor Medicare & Medicaid Population:			
Did the numerator differ for the neither Medicaid nor Medicare & Medicaid population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the neither Medicaid nor Medicare & Medicaid population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the neither Medicaid nor Medicare & Medicaid population?		If other, explain the deviation in the next cell:	
Total Eligible Population:			
Did the numerator differ for the Total Eligible population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the Total Eligible population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the Total Eligible population?		If other, explain the deviation in the next cell:	

F. Additional Notes:



Time to Comprehensive Person- and Family-Centered Diagnostic and Treatment Planning Evaluation (TX-EVAL)

A SAMHSA-Developed Metric

A. Measurement Year:

Insert measurement year based on CCBHC or non-CCBHC status. For CCBHCs, enter DY1 or DY2. For non-CCBHCs, enter year such as FY2017.	
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B. Data Source:

Select the data source type (Medical Records or Other):		If medical records data, select source (EHR, Paper Records, Both):	
If other data source selected, specify source:			

C. Date Range:

Denominator Start Date (mm/dd/yyyy)	
Denominator End Date (mm/dd/yyyy)	
Numerator Start Date (mm/dd/yyyy)	
Numerator End Date (mm/dd/yyyy)	

D. Performance Measure:

Mean number of days after first contact until comprehensive person-centered and family-centered diagnostic and treatment planning evaluation is performed for new consumers

These metrics are stratified to report by age (12-17 years, 18 years and older) and are stratified to report by Medicaid, Medicare & Medicaid, other, and total population.

Measure	Numerator	Denominator	Mean
Age 12-17 years	0	0	
Medicaid			
Medicare & Medicaid			
Other			

Age 18+ years	0	0	
Medicaid			
Medicare & Medicaid			
Other			
Total (all Age Groups)	0	0	
Medicaid	0	0	
Medicare & Medicaid	0	0	
Other	0	0	

E. Adherence to Measure Specifications:

Population included in the denominator (indicate yes or no for each of the options below):			
Medicaid population			
Title XIX-eligible CHIP population			
Title XXI-eligible CHIP population			
Other CHIP enrollees			
Medicare population			
Medicare and Medicaid Dually-Eligible population			
VHA/TRICARE population			
Commercially insured population			
Uninsured population			
Other		If Other, explain whether the denominator is a subset of definitions selected above, please further define the denominator, and indicate the number of consumers excluded:	

<p>Did your calculation of the measure deviate from the measure specification in any way?</p>		<p>If Yes, the measure differs: Explain how the calculation differed and why.</p>	
<p>Does this denominator represent your total measure eligible population as defined by the Technical Specifications for this measure?</p>		<p>If No, the denominator doesn't represent your total eligible population, explain which populations are excluded and why in the next cell:</p>	
<p>Specify the size of the population included in the denominator:</p>		<p>Specify the size of the measure-eligible population.</p>	

Provide the following information for each rate/stratification:

<p>Age Range: 12-17 years</p>			
<p>Did the numerator differ for the 12-17 years age range?</p>		<p>If numerator differs, explain the deviation in the next cell:</p>	
<p>Did the denominator differ for the 12-17 years age range?</p>		<p>If denominator differs, explain the deviation in the next cell:</p>	
<p>Did the calculation differ in some other way for the 12-17 years age range?</p>		<p>If other, explain the deviation in the next cell:</p>	

Age Range: 18+ years

<p>Did the numerator differ for the 18+ years age range?</p>		<p>If numerator differs, explain the deviation in the next cell:</p>	
<p>Did the denominator differ for the 18+ years age range?</p>		<p>If denominator differs, explain the deviation in the next cell:</p>	

Did the calculation differ in some other way for the 18+ years age range?		If other, explain the deviation in the next cell:	
Medicaid Population:			
Did the numerator differ for the Medicaid population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the Medicaid population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the Medicaid population?		If other, explain the deviation in the next cell:	
Medicare & Medicaid Population:			
Did the numerator differ for the Medicare & Medicaid population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the Medicare & Medicaid population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the Medicare & Medicaid population?		If other, explain the deviation in the next cell:	
Neither Medicaid nor Medicare & Medicaid Population:			
Did the numerator differ for the neither Medicaid nor Medicare & Medicaid population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the neither Medicaid nor Medicare & Medicaid population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the neither Medicaid nor Medicare & Medicaid population?		If other, explain the deviation in the next cell:	

Total Eligible Population:			
Did the numerator differ for the Total Eligible population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the Total Eligible population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the Total Eligible population?		If other, explain the deviation in the next cell:	

F. Additional Notes:

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Deaths by Suicide (SUIC)

A SAMHSA-Developed Metric

A. Measurement Year:

Insert measurement year based on CCBHC or non-CCBHC status. For CCBHCs, enter DY1 or DY2. For non-CCBHCs, enter year such as FY2017.

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B. Data Source:

Select the data source type (Medical Records or Other):

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If medical records data, select source (EHR, Paper Records, Both):

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If other data source selected, specify source:

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C. Date Range:

Denominator Start Date (mm/dd/yyyy)

--

Denominator End Date (mm/dd/yyyy)

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Numerator Start Date (mm/dd/yyyy)

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Numerator End Date (mm/dd/yyyy)

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D. Performance Measure:

The percentage of consumers aged 12 years and older who died by suicide during the measurement year

These metrics are stratified to report by age (12-17 years, 18-64 years, 65 years and older, and total (all age groups) and are stratified to report by Medicaid, Medicare & Medicaid, other, and total population.

Measure	Numerator	Denominator	Rate
Age 12-17 years	0	0	
Medicaid			
Medicare & Medicaid			
Other			
Age 18-64 years	0	0	
Medicaid			
Medicare & Medicaid			
Other			
Age 65+ years	0	0	

Medicaid			
Medicare & Medicaid			
Other			
Total (all Age Groups)	0	0	
Medicaid	0	0	
Medicare & Medicaid	0	0	
Other	0	0	

E. Adherence to Measure Specifications:

Population included in the denominator (indicate yes or no for each of the options below):			
Medicaid population			
Title XIX-eligible CHIP population			
Title XXI-eligible CHIP population			
Other CHIP enrollees			
Medicare population			
Medicare and Medicaid Dually-Eligible population			
VHA/TRICARE population			
Commercially insured population			
Uninsured population			
Other			
Did your calculation of the measure deviate from the measure specification in any way?		If Yes, the measure differs: Explain how the calculation differed and why.	

Does this denominator represent your total measure eligible population as defined by the Technical Specifications for this measure?		If No, the denominator doesn't represent your total eligible population, explain which populations are excluded and why in the next cell:	
Specify the size of the population included in the denominator:		Specify the size of the measure-eligible population.	

Provide the following information for each rate/stratification:

Age Range: 12-17 years			
Did the numerator differ for the 12-17 years age range?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the 12-17 years age range?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the 12-17 years age range?		If other, explain the deviation in the next cell:	

Age Range: 18-64 years

Did the numerator differ for the 18-64 years age range?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the 18-64 years age range?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the 18-64 years age range?		If other, explain the deviation in the next cell:	

Age Range: 65+ years

Did the numerator differ for the 65+ years age range?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the 65+ years age range?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the 65+ years age range?		If other, explain the deviation in the next cell:	
Medicaid Population:			
Did the numerator differ for the Medicaid population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the Medicaid population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the Medicaid population?		If other, explain the deviation in the next cell:	
Medicare & Medicaid Population:			
Did the numerator differ for the Medicare & Medicaid population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the Medicare & Medicaid population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the Medicare & Medicaid population?		If other, explain the deviation in the next cell:	
Neither Medicaid nor Medicare & Medicaid Population:			

Did the numerator differ for the neither Medicaid nor Medicare & Medicaid population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the neither Medicaid nor Medicare & Medicaid population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the neither Medicaid nor Medicare & Medicaid population?		If other, explain the deviation in the next cell:	
Total Eligible Population:			
Did the numerator differ for the Total Eligible population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the Total Eligible population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the Total Eligible population?		If other, explain the deviation in the next cell:	

F. Additional Notes:

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Documentation of Current Medications in the Medical Record (DOC)

Based on a measure stewarded by the Centers for Medicare & Medicaid Services (NQF #0419, PQRS #130)

A. Measurement Year:

Insert measurement year based on CCBHC or non-CCBHC status. For CCBHCs, enter DY1 or DY2. For non-CCBHCs, enter year such as FY2017.

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B. Data Source:

Select the data source type (Medical Records or Other):

If medical records data, select source (EHR, Paper Records, Both):

--

If other data source selected, specify source:

C. Date Range:

Denominator Start Date (mm/dd/yyyy)

Denominator End Date (mm/dd/yyyy)

Numerator Start Date (mm/dd/yyyy)

Numerator End Date (mm/dd/yyyy)

D. Performance Measure:

The percentage of visits for consumers aged 18 years and older for which the eligible professional attests to documenting a list of current medications using all immediate resources available on the date of the encounter. This list must include ALL known prescriptions, over-the-counters, herbals, and vitamin/mineral/dietary (nutritional) supplements AND must contain the medications' name, dosage, frequency, and route of administration.

The measure is stratified to report Medicaid, Medicare & Medicaid, other, and total population.

Measure	Numerator	Denominator	Rate
Medicaid			
Medicare & Medicaid			
Other			
Total	0	0	

E. Adherence to Measure Specifications:

Population included in the denominator (indicate yes or no for each of the options below):

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Medicaid population			
Title XIX-eligible CHIP population			
Title XXI-eligible CHIP population			
Other CHIP enrollees			
Medicare population			
Medicare and Medicaid Dually-Eligible population			
VHA/TRICARE population			
Commercially insured population			
Uninsured population			
Other		If Other, explain whether the denominator is a subset of definitions selected above, please further define the denominator, and indicate the number of consumers excluded:	
Did your calculation of the measure deviate from the measure specification in any way?		If Yes, the measure differs: Explain how the calculation differed and why.	
Does this denominator represent your total measure eligible population as defined by the Technical Specifications for this measure?		If No, the denominator doesn't represent your total eligible population, explain which populations are excluded and why in the next cell:	
Specify the size of the population included in the denominator:		Specify the size of the measure-eligible population.	

Provide the following information for each rate/stratification:

Medicaid Population:			
Did the numerator differ for the Medicaid population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the Medicaid population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the Medicaid population?		If other, explain the deviation in the next cell:	
Medicare & Medicaid Population:			
Did the numerator differ for the Medicare & Medicaid population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the Medicare & Medicaid population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the Medicare & Medicaid population?		If other, explain the deviation in the next cell:	
Neither Medicaid nor Medicare & Medicaid Population:			
Did the numerator differ for the neither Medicaid nor Medicare & Medicaid population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the neither Medicaid nor Medicare & Medicaid population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the neither Medicaid nor Medicare & Medicaid population?		If other, explain the deviation in the next cell:	
Total Eligible Population:			

Did the numerator differ for the Total Eligible population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the Total Eligible population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the Total Eligible population?		If other, explain the deviation in the next cell:	

F. Additional Notes:

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Controlling High Blood Pressure (CBP-BH)

Based on a measure stewarded by the National Committee for Quality Assurance (NQF #0018, HEDIS 2016, Medicaid Adult Core Set)

A. Measurement Year:

Insert measurement year based on CCBHC or non-CCBHC status. For CCBHCs, enter DY1 or DY2. For non-CCBHCs, enter year such as FY2017.		
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B. Data Source:

Select the data source type:		
If hybrid data, select administrative data source (Medicaid Management Information System (MMIS) or Other):		If other administrative hybrid data, specify data source:
If hybrid data, select medical records source (EHR, Paper Records, Both):		
If hybrid data, what is the sample size?		
If Hybrid, what is the measure-eligible population?		
If source other than hybrid selected, provide source:		

C. Date Range:

Denominator Start Date (mm/dd/yyyy)		
Denominator End Date (mm/dd/yyyy)		
Numerator Start Date (mm/dd/yyyy)		
Numerator End Date (mm/dd/yyyy)		

D. Performance Measure:

Percentage of consumers 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:

- Consumers ages 18 to 59 whose BP was <140/90 mm Hg
- Consumers ages 60 to 85 with a diagnosis of diabetes whose BP was <140/90 mm Hg

- Consumers ages 60 to 85 without a diagnosis of diabetes whose BP was <150/90 mm Hg

Measure	Numerator	Denominator	Rate
18-64 years	0	0	
Medicaid			
Medicare & Medicaid			
Other			
65-85 years	0	0	
Medicaid			
Medicare & Medicaid			
Other			

E. Adherence to Measure Specifications:

Population included in the denominator (indicate yes or no for each of the options below):			
Medicaid population			
Title XIX-eligible CHIP population			
Title XXI-eligible CHIP population			
Other CHIP enrollees			
Medicare population			
Medicare and Medicaid Dually-Eligible population			
VHA/TRICARE population			
Commercially insured population			
Uninsured population			
Other			

Did your calculation of the measure deviate from the measure specification in any way?		If Yes, the measure differs: Explain how the calculation differed and why.	
Does this denominator represent your total measure eligible population as defined by the Technical Specifications for this measure?		If No, the denominator doesn't represent your total eligible population, explain which populations are excluded and why in the next cell:	
Specify the size of the population included in the denominator:		Specify the size of the measure-eligible population.	

Provide the following information for each rate/stratification:

Age Range: 18-64 years

Did the numerator differ for the 18-64 years age range?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the 18-64 years age range?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the 18-64 years age range?		If other, explain the deviation in the next cell:	

Age Range: 65-85 years

Did the numerator differ for the 65+ years age range?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the 65+ years age range?		If denominator differs, explain the deviation in the next cell:	

Did the calculation differ in some other way for the 65+ years age range?		If other, explain the deviation in the next cell:	
Medicaid Population:			
Did the numerator differ for the Medicaid population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the Medicaid population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the Medicaid population?		If other, explain the deviation in the next cell:	
Medicare & Medicaid Population:			
Did the numerator differ for the Medicare & Medicaid population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the Medicare & Medicaid population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the Medicare & Medicaid population?		If other, explain the deviation in the next cell:	
Neither Medicaid nor Medicare & Medicaid Population:			
Did the numerator differ for the neither Medicaid nor Medicare & Medicaid population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the neither Medicaid nor Medicare & Medicaid population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the neither Medicaid nor Medicare & Medicaid population?		If other, explain the deviation in the next cell:	

F. Additional Notes:

State-Lead Measures Required for the CCBHC Demonstration Program

State Name:	
BHC Name:	
BHC Identifier:	

Housing Status (HOU)

A SAMHSA-Developed Metric

A. Measurement Year:

Insert measurement year based on CCBHC or non-CCBHC status. For CCBHCs, enter DY1 or DY2. For non-CCBHCs, enter year such as FY2017.

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B. Data Source:

Select the data source type (Uniform Reporting System (URS) or Other):

--

If other data source selected, specify source:

--

C. Date Range:

Measurement Year Part One Start Date (mm/dd/yyyy)

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Measurement Year Part One End Date (mm/dd/yyyy)

--

Measurement Year Part Two Start Date (mm/dd/yyyy)

--

Measurement Year Part Two End Date (mm/dd/yyyy)

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D. Performance Measure:

The percentage of consumers in 10 categories of living situation

Living situation	Numerator	Denominator	Percentage
Private residence			0
Foster home			0
Residential care			0
Crisis residence			0
Residential treatment center			0
Institutional setting			0
Jail (correctional facility)			0
Homeless (shelter)			0
Other			0

Not available		0
Total	0	0

E. Adherence to Measure Specifications:

Population included in the denominator (indicate yes or no for each of the options below):			
Medicaid population			
Title XIX-eligible CHIP population			
Title XXI-eligible CHIP population			
Other CHIP enrollees			
Medicare population			
Medicare and Medicaid Dually-Eligible population			
VHA/TRICARE population			
Commercially insured population			
Uninsured population			
Other		If Other, explain whether the denominator is a subset of definitions selected above, please further define the denominator, and indicate the number of consumers excluded:	
Did your calculation of the measure deviate from the measure specification in any way?		If Yes, the measure differs: Explain how the calculation differed and why.	

Does this denominator represent your total measure eligible population as defined by the Technical Specifications for this measure?		If No, the denominator doesn't represent your total eligible population , explain which populations are excluded and why in the next cell:	
Specify the size of the population included in the denominator:		Specify the size of the measure-eligible population.	

F. Additional Notes:

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Patient Experience of Care Survey (PEC)

A SAMHSA-Developed Metric

A. Measurement Year:

Insert measurement year based on CCBHC or non-CCBHC status. For CCBHCs, enter DY1 or DY2. For non-CCBHCs, enter year such as FY2017.

B. Data Source:

Select the data source type (Mental Health Statistics Improvement Program (MHSIP) Adult Consumer Experience of Care Survey or Other):

If other data source selected, specify source:

C. Date Range:

Survey Start Date (mm/dd/yyyy)

Survey End Date (mm/dd/yyyy)

D. Performance Measure:

Annual completion and submission of Mental Health Statistics Improvement Program (MHSIP) Adult Consumer Experience of Care identifying results separately for CCBHCs and comparison clinics and oversampling those clinics.

[For this BHC, complete a copy of Tables 11 and 11a of the URS reporting template that is current at the time of the survey \(http://](http://)

E. Adherence to Measure Specifications:

Population included in the denominator (indicate yes or no for each of the options below):

Medicaid population	
Title XIX-eligible CHIP population	
Title XXI-eligible CHIP population	
Other CHIP enrollees	
Medicare population	
Medicare and Medicaid Dually-Eligible population	
VHA/TRICARE population	
Commercially insured population	

Uninsured population	
Other	
Did your calculation of the measure deviate from the measure specification in any way?	
If Yes, the measure differs, did you oversample this clinic?	

F. Additional Notes:

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<p>If Other, explain whether the denominator is a subset of definitions selected above, please further define the denominator, and indicate the number of consumers excluded:</p>	
<p>If Yes, the measure differs, explain how the calculation differed and why:</p>	
<p>If Yes, the measure differs, specify the size of the sample:</p>	

Youth/Family Experience of Care Survey (Y/FEC)

A SAMHSA-Developed Metric

A. Measurement Year:

Insert measurement year based on CCBHC or non-CCBHC status. For CCBHCs, enter DY1 or DY2. For non-CCBHCs, enter year such as FY2017.

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B. Data Source:

Select the data source type (Youth/Family Services Survey for Families (YSS-F) Experience of Care Survey or Other):

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If other data source selected, specify source:

--

C. Date Range:

Survey Start Date (mm/dd/yyyy)

--

Survey End Date (mm/dd/yyyy)

--

D. Performance Measure:

Annual completion and submission of Youth/Family Services Survey for Families (YSS-F) Experience of Care Survey, for the CCBHC Der identifying results separately for CCBHCs and comparison clinics and oversampling those clinics.

[For this BHC, complete a copy of Tables 11 and 11a of the URS reporting template that is current at the time of the survey \(http://www](http://www)

E. Adherence to Measure Specifications:

Population included in the denominator (indicate yes or no for each of the options below):

Medicaid population	
Title XIX-eligible CHIP population	
Title XXI-eligible CHIP population	
Other CHIP enrollees	
Medicare population	
Medicare and Medicaid Dually-Eligible population	
VHA/TRICARE population	
Commercially insured population	

Uninsured population		
Other		If Other, explain whether the denominator is a subset of definitions selected above, please further define the denominator, and indicate the number of consumers excluded:
Did your calculation of the measure deviate from the measure specification in any way?		If Yes, the measure differs , explain how the calculation differed and why:
If Yes, the measure differs , did you oversample this clinic?		If Yes, the measure differs , specify the size of the sample:

F. Additional Notes:

[Redacted area]

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Follow-up After Emergency Department Visit for Mental Illness (FUM)			
Based on a measure stewarded by the National Committee for Quality Assurance (Draft HEDIS 2017)			
A. Measurement Year:			
Insert measurement year based on CCBHC or non-CCBHC status. For CCBHCs, enter DY1 or DY2. For non-CCBHCs, enter year such as FY2017.			
B. Data Source:			
Select the data source type:		If other administrative data, specify data source:	
If administrative data only, select source (Medicaid Management Information System (MMIS) or Other):			
If source other than administrative selected, provide source:			
C. Date Range:			
Denominator Start Date (mm/dd/yyyy)			
Denominator End Date (mm/dd/yyyy)			
Numerator Start Date (mm/dd/yyyy)			
Numerator End Date (mm/dd/yyyy)			
D. Performance Measure:			
The percentage of emergency department (ED) visits for consumers 6 years of age and older with a primary diagnosis of mental illness, who had an outpatient visit, an intensive outpatient encounter or a partial hospitalization for mental illness. Two rates are reported:			
1. The percentage of ED visits for which the consumer received follow-up within 30 days of the ED visit.			
2. The percentage of ED visits for which the consumer received follow-up within 7 days of the ED visit.			
The measure is stratified to report Medicaid, Medicare & Medicaid, other, and total population.			
Measure	Numerator	Denominator	Rate
ED MH Visits with 7 Day Follow-up			
Medicaid			
Medicare & Medicaid			
Other			
Total	0	0	

ED MH Visits with 30 Day Follow-up			
Medicaid			
Medicare & Medicaid			
Other			
Total		0	0
E. Adherence to Measure Specifications:			
Population included in the denominator (indicate yes or no for each of the options below):			
Medicaid population			
Title XIX-eligible CHIP population			
Title XXI-eligible CHIP population			
Other CHIP enrollees			
Medicare population			
Medicare and Medicaid Dually-Eligible population			
VHA/TRICARE population			
Commercially insured population			
Uninsured population			
Other		If Other, explain whether the denominator is a subset of definitions selected above, please further define the denominator, and indicate the number of consumers excluded:	
Did your calculation of the measure deviate from the measure specification in any way?		If Yes, the measure differs: Explain how the calculation differed and why.	

Does this denominator represent your total measure eligible population as defined by the Technical Specifications for this measure?		If No, the denominator doesn't represent your total eligible population , explain which populations are excluded and why in the next cell:	
Specify the size of the population included in the denominator:		Specify the size of the measure-eligible population.	
Provide the following information for each rate/stratification:			
ED MH Visits with 7 Day Follow-up:			
Medicaid Population:			
Did the numerator differ for the Medicaid population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the Medicaid population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the Medicaid population?		If other, explain the deviation in the next cell:	
Medicare & Medicaid Population:			
Did the numerator differ for the Medicare & Medicaid population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the Medicare & Medicaid population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the Medicare & Medicaid population?		If other, explain the deviation in the next cell:	
Neither Medicaid nor Medicare & Medicaid Population:			

Did the numerator differ for the neither Medicaid nor Medicare & Medicaid population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the neither Medicaid nor Medicare & Medicaid population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the neither Medicaid nor Medicare & Medicaid population?		If other, explain the deviation in the next cell:	
Total Eligible Population:			
Did the numerator differ for the Total Eligible population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the Total Eligible population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the Total Eligible population?		If other, explain the deviation in the next cell:	
ED MH Visits with 30 Day Follow-up:			
Medicaid Population:			
Did the numerator differ for the Medicaid population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the Medicaid population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the Medicaid population?		If other, explain the deviation in the next cell:	
Medicare & Medicaid Population:			
Did the numerator differ for the Medicare & Medicaid population?		If numerator differs, explain the deviation in the next cell:	

Did the denominator differ for the Medicare & Medicaid population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the Medicare & Medicaid population?		If other, explain the deviation in the next cell:	
Neither Medicaid nor Medicare & Medicaid Population:			
Did the numerator differ for the neither Medicaid nor Medicare & Medicaid population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the neither Medicaid nor Medicare & Medicaid population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the neither Medicaid nor Medicare & Medicaid population?		If other, explain the deviation in the next cell:	
Total Eligible Population:			
Did the numerator differ for the Total Eligible population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the Total Eligible population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the Total Eligible population?		If other, explain the deviation in the next cell:	
F. Additional Notes:			

Follow-up After Emergency Department Visit for Alcohol and Other Drug Dependence (FUA)

Based on a measure stewarded by the National Committee for Quality Assurance (Draft HEDIS 2017)

A. Measurement Year:

Insert measurement year based on CCBHC or non-CCBHC status. For CCBHCs, enter DY1 or DY2. For non-CCBHCs, enter year such as FY2017.

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B. Data Source:

Select the data source type:

If administrative data only, select source (Medicaid Management Information System (MMIS) or Other):

If other administrative data, specify data source:

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If source other than administrative selected, provide source:

--

C. Date Range:

Denominator Start Date (mm/dd/yyyy)

Denominator End Date (mm/dd/yyyy)

Numerator Start Date (mm/dd/yyyy)

Numerator End Date (mm/dd/yyyy)

D. Performance Measure:

The percentage of emergency department (ED) visits for consumers 13 years of age and older with a primary diagnosis of alcohol or other drug (AOD) dependence, who had an outpatient visit, an intensive outpatient encounter or a partial hospitalization for AOD. Two rates are reported:

1. The percentage of ED visits for which the consumer received follow-up within 30 days of the ED visit.
2. The percentage of ED visits for which the consumer received follow-up within 7 days of the ED visit.

The measure is stratified to report Medicaid, Medicare & Medicaid, other, and total population.

Measure	Numerator	Denominator	Rate
ED AOD Visits with 7 Day Follow-up			
Medicaid			
Medicare & Medicaid			
Other			
Total	0	0	
ED AOD Visits with 30 Day Follow-up			
Medicaid			

Medicare & Medicaid			
Other			
Total	0	0	
E. Adherence to Measure Specifications:			
Population included in the denominator (indicate yes or no for each of the options below):			
Medicaid population			
Title XIX-eligible CHIP population			
Title XXI-eligible CHIP population			
Other CHIP enrollees			
Medicare population			
Medicare and Medicaid Dually-Eligible population			
VHA/TRICARE population			
Commercially insured population			
Uninsured population			
Other			
Did your calculation of the measure deviate from the measure specification in any way?		If Yes, the measure differs: Explain how the calculation differed and why.	
Does this denominator represent your total measure eligible population as defined by the Technical Specifications for this measure?		If No, the denominator doesn't represent your total eligible population, explain which populations are excluded and why in the next cell:	

Specify the size of the population included in the denominator:		Specify the size of the measure-eligible population.	
Provide the following information for each rate/stratification:			
ED AOD Visits with 7 Day Follow-up:			
Medicaid Population:			
Did the numerator differ for the Medicaid population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the Medicaid population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the Medicaid population?		If other, explain the deviation in the next cell:	
Medicare & Medicaid Population:			
Did the numerator differ for the Medicare & Medicaid population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the Medicare & Medicaid population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the Medicare & Medicaid population?		If other, explain the deviation in the next cell:	
Neither Medicaid nor Medicare & Medicaid Population:			
Did the numerator differ for the neither Medicaid nor Medicare & Medicaid population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the neither Medicaid nor Medicare & Medicaid population?		If denominator differs, explain the deviation in the next cell:	

Did the calculation differ in some other way for the neither Medicaid nor Medicare & Medicaid population?		If other, explain the deviation in the next cell:	
Total Eligible Population:			
Did the numerator differ for the Total Eligible population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the Total Eligible population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the Total Eligible population?		If other, explain the deviation in the next cell:	
ED AOD Visits with 30 Day Follow-up:			
Medicaid Population:			
Did the numerator differ for the Medicaid population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the Medicaid population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the Medicaid population?		If other, explain the deviation in the next cell:	
Medicare & Medicaid Population:			
Did the numerator differ for the Medicare & Medicaid population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the Medicare & Medicaid population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the Medicare & Medicaid population?		If other, explain the deviation in the next cell:	
Neither Medicaid nor Medicare & Medicaid Population:			

Did the numerator differ for the neither Medicaid nor Medicare & Medicaid population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the neither Medicaid nor Medicare & Medicaid population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the neither Medicaid nor Medicare & Medicaid population?		If other, explain the deviation in the next cell:	
Total Eligible Population:			
Did the numerator differ for the Total Eligible population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the Total Eligible population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the Total Eligible population?		If other, explain the deviation in the next cell:	
F. Additional Notes:			

Plan All-Cause Readmissions Rate (PCR-BH)

Based on a measure stewarded by the National Committee for Quality Assurance (NQF #1768, HEDIS 2016, Medicaid Adult Core Set)

A. Measurement Year:

Insert measurement year based on CCBHC or non-CCBHC status. For CCBHCs, enter DY1 or DY2. For non-CCBHCs, enter year such as FY2017.

B. Data Source:

Select the data source type:

If administrative data only, select source (Medicaid Management Information System (MMIS) or Other):

If source other than administrative selected, provide source:

If other administrative data, specify data source:

C. Date Range:

Denominator Start Date (mm/dd/yyyy)

Denominator End Date (mm/dd/yyyy)

Numerator Start Date (mm/dd/yyyy)

Numerator End Date (mm/dd/yyyy)

D. Performance Measure:

For consumers age 18 and older, the number of acute inpatient stays during the measurement year that were followed by an unplanned acute readmission for any diagnosis within 30 days.

Data are reported in the following three categories:

Count of Index Hospital Stays (IHS)(denominator)

Count of 30-Day Readmissions (numerator)

Readmission Rate

The measure is stratified to report by age (18-64 years, 65 and older), and by the Medicaid, Medicare & Medicaid, and other population.

Measure	Numerator	Denominator	Rate
18-64 years	0	0	
Medicaid			

Medicare & Medicaid			
Other			
65+ years	0	0	
Medicaid			
Medicare & Medicaid			
Other			
E. Adherence to Measure Specifications:			
Population included in the denominator (indicate yes or no for each of the options below):			
Medicaid population			
Title XIX-eligible CHIP population			
Title XXI-eligible CHIP population			
Other CHIP enrollees			
Medicare population			
Medicare and Medicaid Dually-Eligible population			
VHA/TRICARE population			
Commercially insured population			
Uninsured population			
Other			
Did your calculation of the measure deviate from the measure specification in any way?		If Yes, the measure differs: Explain how the calculation differed and why.	

Does this denominator represent your total measure eligible population as defined by the Technical Specifications for this measure?		If No, the denominator doesn't represent your total eligible population, explain which populations are excluded and why in the next cell:	
Specify the size of the population included in the denominator:		Specify the size of the measure-eligible population.	
Provide the following information for each rate/stratification:			
Age Range: 18-64 years			
Did the numerator differ for the 18-64 years age range?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the 18-64 years age range?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the 18-64 years age range?		If other, explain the deviation in the next cell:	
Age Range: 65+ years			
Did the numerator differ for the 65+ years age range?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the 65+ years age range?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the 65+ years age range?		If other, explain the deviation in the next cell:	
Medicaid Population:			

Did the numerator differ for the Medicaid population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the Medicaid population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the Medicaid population?		If other, explain the deviation in the next cell:	
Medicare & Medicaid Population:			
Did the numerator differ for the Medicare & Medicaid population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the Medicare & Medicaid population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the Medicare & Medicaid population?		If other, explain the deviation in the next cell:	
Neither Medicaid nor Medicare & Medicaid Population:			
Did the numerator differ for the neither Medicaid nor Medicare & Medicaid population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the neither Medicaid nor Medicare & Medicaid population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the neither Medicaid nor Medicare & Medicaid population?		If other, explain the deviation in the next cell:	
F. Additional Notes:			

End of Worksheet

Diabetes Screening for People With Schizophrenia or Bipolar Disorder Who Are Using Antipsychotic Medications (SSD)

Based on a measure stewarded by the National Committee for Quality Assurance (NQF #1932, HEDIS 2016)

A. Measurement Year:

Insert measurement year based on CCBHC or non-CCBHC status. For CCBHCs, enter DY1 or DY2. For non-CCBHCs, enter year such as FY2017.

B. Data Source:

Select the data source type:

If administrative data only, select source (Medicaid Management Information System (MMIS) or Other):

<input type="text"/>
<input type="text"/>
<input type="text"/>

If other administrative data, specify data source:

If source other than administrative selected, provide source:

C. Date Range:

Denominator Start Date (mm/dd/yyyy)

Denominator End Date (mm/dd/yyyy)

Numerator Start Date (mm/dd/yyyy)

Numerator End Date (mm/dd/yyyy)

<input type="text"/>
<input type="text"/>
<input type="text"/>
<input type="text"/>

D. Performance Measure:

The percentage of consumers 18-64 years of age with Schizophrenia or Bipolar Disorder, who were dispensed an antipsychotic medication and had a diabetes screening test during the measurement year

The measure is stratified to report Medicaid, Medicare & Medicaid, other, and total population.

Measure	Numerator	Denominator	Rate
Medicaid	<input type="text"/>	<input type="text"/>	<input type="text"/>
Medicare & Medicaid	<input type="text"/>	<input type="text"/>	<input type="text"/>
Other	<input type="text"/>	<input type="text"/>	<input type="text"/>
Total	0	0	

E. Adherence to Measure Specifications:

Population included in the denominator (indicate yes or no for each of the options below):

Medicaid population			
Title XIX-eligible CHIP population			
Title XXI-eligible CHIP population			
Other CHIP enrollees			
Medicare population			
Medicare and Medicaid Dually-Eligible population			
VHA/TRICARE population			
Commercially insured population			
Uninsured population			
Other		If Other, explain whether the denominator is a subset of definitions selected above, please further define the denominator, and indicate the number of consumers excluded:	
Did your calculation of the measure deviate from the measure specification in any way?		If Yes, the measure differs: Explain how the calculation differed and why.	
Does this denominator represent your total measure eligible population as defined by the Technical Specifications for this measure?		If No, the denominator doesn't represent your total eligible population, explain which populations are excluded and why in the next cell:	
Specify the size of the population included in the denominator:		Specify the size of the measure-eligible population.	

Provide the following information for each rate/stratification:			
Medicaid Population:			
Did the numerator differ for the Medicaid population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the Medicaid population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the Medicaid population?		If other, explain the deviation in the next cell:	
Medicare & Medicaid Population:			
Did the numerator differ for the Medicare & Medicaid population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the Medicare & Medicaid population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the Medicare & Medicaid population?		If other, explain the deviation in the next cell:	
Neither Medicaid nor Medicare & Medicaid Population:			
Did the numerator differ for the neither Medicaid nor Medicare & Medicaid population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the neither Medicaid nor Medicare & Medicaid population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the neither Medicaid nor Medicare & Medicaid population?		If other, explain the deviation in the next cell:	
Total Eligible Population:			

Did the numerator differ for the Total Eligible population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the Total Eligible population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the Total Eligible population?		If other, explain the deviation in the next cell:	
F. Additional Notes:			

Adherence to Antipsychotic Medications for Individuals With Schizophrenia (SAA-BH)			
Based on a measure stewarded by the Centers for Medicare and Medicaid Services (HEDIS 2016, Medicaid Adult Core Set)			
A. Measurement Year:			
Insert measurement year based on CCBHC or non-CCBHC status. For CCBHCs, enter DY1 or DY2. For non-CCBHCs, enter year such as FY2017.			
B. Data Source:			
Select the data source type: If administrative data only, select source (Medicaid Management Information System (MMIS) or Other):		If other administrative data, specify data source:	
If source other than administrative selected, provide source:			
C. Date Range:			
Denominator Start Date (mm/dd/yyyy)			
Denominator End Date (mm/dd/yyyy)			
Numerator Start Date (mm/dd/yyyy)			
Numerator End Date (mm/dd/yyyy)			
D. Performance Measure:			
The percentage of clients ages 19 to 64 during the measurement year with schizophrenia who were dispensed and remained on an antipsychotic medication for at least 80 percent of their treatment period.			
The measure is stratified to report Medicaid, Medicare & Medicaid, neither, and total population.			
Measure	Numerator	Denominator	Rate
Medicaid			
Medicare & Medicaid			
Other			
Total		0	0
E. Adherence to Measure Specifications:			
Population included in the denominator (indicate yes or no for each of the options below):			

Medicaid population			
Title XIX-eligible CHIP population			
Title XXI-eligible CHIP population			
Other CHIP enrollees			
Medicare population			
Medicare and Medicaid Dually-Eligible population			
VHA/TRICARE population			
Commercially insured population			
Uninsured population			
Other		If Other, explain whether the denominator is a subset of definitions selected above, please further define the denominator, and indicate the number of consumers excluded:	
Did your calculation of the measure deviate from the measure specification in any way?		If Yes, the measure differs: Explain how the calculation differed and why.	
Does this denominator represent your total measure eligible population as defined by the Technical Specifications for this measure?		If No, the denominator doesn't represent your total eligible population, explain which populations are excluded and why in the next cell:	
Specify the size of the population included in the denominator:		Specify the size of the measure-eligible population.	

Provide the following information for each rate/stratification:			
Medicaid Population:			
Did the numerator differ for the Medicaid population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the Medicaid population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the Medicaid population?		If other, explain the deviation in the next cell:	
Medicare & Medicaid Population:			
Did the numerator differ for the Medicare & Medicaid population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the Medicare & Medicaid population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the Medicare & Medicaid population?		If other, explain the deviation in the next cell:	
Neither Medicaid nor Medicare & Medicaid Population:			
Did the numerator differ for the neither Medicaid nor Medicare & Medicaid population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the neither Medicaid nor Medicare & Medicaid population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the neither Medicaid nor Medicare & Medicaid population?		If other, explain the deviation in the next cell:	
Total Eligible Population:			

Did the numerator differ for the Total Eligible population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the Total Eligible population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the Total Eligible population?		If other, explain the deviation in the next cell:	
F. Additional Notes:			

Follow-up After Hospitalization for Mental Illness (FUH-BH-A)

Based on a measure stewarded by the National Committee for Quality Assurance (NQF #0576, HEDIS 2016, Medicaid Adult Core Set)

A. Measurement Year:

Insert measurement year based on CCBHC or non-CCBHC status. For CCBHCs, enter DY1 or DY2. For non-CCBHCs, enter year such as FY2017.

B. Data Source:

Select the data source type:

If administrative data only, select source (Medicaid Management Information System (MMIS) or Other):

If other administrative data, specify data source:

If source other than administrative selected, provide source:

C. Date Range:

Denominator Start Date (mm/dd/yyyy)

Denominator End Date (mm/dd/yyyy)

30 Day Follow-up:

Numerator Start Date (mm/dd/yyyy)

Numerator End Date (mm/dd/yyyy)

7 Day Follow-up:

Numerator Start Date (mm/dd/yyyy)

Numerator End Date (mm/dd/yyyy)

D. Performance Measure:

The percentage of discharges for consumers age 21 and older who were hospitalized for treatment of selected mental illness diagnoses and who had an outpatient visit, an intensive outpatient encounter, or partial hospitalization with a mental health practitioner. Two rates are reported:

1. Percentage of discharges for which the consumer received follow-up within 30 days of discharge
2. Percentage of discharges for which the consumer received follow-up within 7 days of discharge

For each of those rates, the measure is stratified to report by age (21-64 years, 65 and older), and by the Medicaid, Medicare & Medicaid, and other population.

Measure	Numerator	Denominator	Rate
---------	-----------	-------------	------

30-Day Follow-up		
21-64 years	0	0
Medicaid		
Medicare & Medicaid		
Other		
65+ years	0	0
Medicaid		
Medicare & Medicaid		
Other		
7-Day Follow-up		
21-64 years	0	0
Medicaid		
Medicare & Medicaid		
Other		
65+ years	0	0
Medicaid		
Medicare & Medicaid		
Other		
E. Adherence to Measure Specifications:		
Population included in the denominator (indicate yes or no for each of the options below):		
Medicaid population		
Title XIX-eligible CHIP population		
Title XXI-eligible CHIP population		
Other CHIP enrollees		
Medicare population		
Medicare and Medicaid Dually-Eligible population		
VHA/TRICARE population		
Commercially insured population		
Uninsured population		

Other		If Other, explain whether the denominator is a subset of definitions selected above, please further define the denominator, and indicate the number of consumers excluded:	
Did your calculation of the measure deviate from the measure specification in any way?		If Yes, the measure differs: Explain how the calculation differed and why.	
Does this denominator represent your total measure eligible population as defined by the Technical Specifications for this measure?		If No, the denominator doesn't represent your total eligible population, explain which populations are excluded and why in the next cell:	
Specify the size of the population included in the denominator:		Specify the size of the measure-eligible population.	
Provide the following information for each rate/stratification:			
Follow-up Within 30 Days of Discharge:			
Age Range: 21-64 years			
Did the numerator differ for the 21-64 years age range?		If numerator differs, explain the deviation in the next cell:	

Did the denominator differ for the 21-64 years age range?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the 21-64 years age range?		If other, explain the deviation in the next cell:	
Age Range: 65+ years			
Did the numerator differ for the 65+ years age range?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the 65+ years age range?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the 65+ years age range?		If other, explain the deviation in the next cell:	
Medicaid Population:			
Did the numerator differ for the Medicaid population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the Medicaid population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the Medicaid population?		If other, explain the deviation in the next cell:	
Medicare & Medicaid Population:			
Did the numerator differ for the Medicare & Medicaid population?		If numerator differs, explain the deviation in the next cell:	

Did the denominator differ for the Medicare & Medicaid population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the Medicare & Medicaid population?		If other, explain the deviation in the next cell:	
Neither Medicaid nor Medicare & Medicaid Population:			
Did the numerator differ for the neither Medicaid nor Medicare & Medicaid population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the neither Medicaid nor Medicare & Medicaid population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the neither Medicaid nor Medicare & Medicaid population?		If other, explain the deviation in the next cell:	
Follow-up Within 7 days of Discharge:			
Age Range: 21-64 years			
Did the numerator differ for the 21-64 years age range?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the 21-64 years age range?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the 21-64 years age range?		If other, explain the deviation in the next cell:	
Age Range: 65+ years			

Did the numerator differ for the 65+ years age range?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the 65+ years age range?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the 65+ years age range?		If other, explain the deviation in the next cell:	
Medicaid Population:			
Did the numerator differ for the Medicaid population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the Medicaid population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the Medicaid population?		If other, explain the deviation in the next cell:	
Medicare & Medicaid Population:			
Did the numerator differ for the Medicare & Medicaid population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the Medicare & Medicaid population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the Medicare & Medicaid population?		If other, explain the deviation in the next cell:	
Neither Medicaid nor Medicare & Medicaid Population:			

Did the numerator differ for the neither Medicaid nor Medicare & Medicaid population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the neither Medicaid nor Medicare & Medicaid population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the neither Medicaid nor Medicare & Medicaid population?		If other, explain the deviation in the next cell:	
F. Additional Notes:			

Follow-Up After Hospitalization For Mental Illness (FUH-BH-C)			
Based on a measure stewarded by the National Committee for Quality Assurance (NQF #0576, HEDIS 2016, Medicaid Child and Adolescent Core Set)			
A. Measurement Year:			
Insert measurement year based on CCBHC or non-CCBHC status. For CCBHCs, enter DY1 or DY2. For non-CCBHCs, enter year such as FY2017.			
B. Data Source:			
Select the data source type:		If other administrative data, specify data source:	
If administrative data only, select source (Medicaid Management Information System (MMIS) or Other):			
If source other than administrative selected, provide source:			
C. Date Range:			
Denominator Start Date (mm/dd/yyyy)			
Denominator End Date (mm/dd/yyyy)			
30 Day Follow-up:			
Numerator Start Date (mm/dd/yyyy)			
Numerator End Date (mm/dd/yyyy)			
7 Day Follow-up:			
Numerator Start Date (mm/dd/yyyy)			
Numerator End Date (mm/dd/yyyy)			
D. Performance Measure:			
<p>Percentage of discharges for children and adolescents ages 6 to 20 who were hospitalized for treatment of selected mental illness diagnoses and who had an outpatient visit, an intensive outpatient encounter, or partial hospitalization with a mental health practitioner. Two rates are reported:</p> <ol style="list-style-type: none"> 1. Percentage of discharges for which children received follow-up within 30 days of discharge 2. Percentage of discharges for which children received follow-up within 7 days of discharge <p>For each of those rates, the measure is stratified to report by the Medicaid, Medicare & Medicaid, other, and total population.</p>			
Measure	Numerator	Denominator	Rate
30-Day Follow-up			

Medicaid			
Medicare & Medicaid			
Other			
Total	0	0	
7-Day Follow-up			
Medicaid			
Medicare & Medicaid			
Other			
Total	0	0	
E. Adherence to Measure Specifications:			
Population included in the denominator (indicate yes or no for each of the options below):			
Medicaid population			
Title XIX-eligible CHIP population			
Title XXI-eligible CHIP population			
Other CHIP enrollees			
Medicare population			
Medicare and Medicaid Dually-Eligible population			
VHA/TRICARE population			
Commercially insured population			
Uninsured population			
Other		If Other, explain whether the denominator is a subset of definitions selected above, please further define the denominator, and indicate the number of consumers excluded:	
Did your calculation of the measure deviate from the measure specification in any way?		If Yes, the measure differs: Explain how the calculation differed and why.	

Does this denominator represent your total measure eligible population as defined by the Technical Specifications for this measure?		If No, the denominator doesn't represent your total eligible population , explain which populations are excluded and why in the next cell:	
Specify the size of the population included in the denominator:		Specify the size of the measure-eligible population.	
Provide the following information for each rate/stratification:			
30-Day Follow-up			
Medicaid Population:			
Did the numerator differ for the Medicaid population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the Medicaid population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the Medicaid population?		If other, explain the deviation in the next cell:	
Medicare & Medicaid Population:			
Did the numerator differ for the Medicare & Medicaid population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the Medicare & Medicaid population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the Medicare & Medicaid population?		If other, explain the deviation in the next cell:	
Neither Medicaid nor Medicare & Medicaid Population:			

Did the numerator differ for the neither Medicaid nor Medicare & Medicaid population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the neither Medicaid nor Medicare & Medicaid population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the neither Medicaid nor Medicare & Medicaid population?		If other, explain the deviation in the next cell:	
7-Day Follow-up			
Medicaid Population:			
Did the numerator differ for the Medicaid population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the Medicaid population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the Medicaid population?		If other, explain the deviation in the next cell:	
Medicare & Medicaid Population:			
Did the numerator differ for the Medicare & Medicaid population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the Medicare & Medicaid population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the Medicare & Medicaid population?		If other, explain the deviation in the next cell:	
Neither Medicaid nor Medicare & Medicaid Population:			

Did the numerator differ for the neither Medicaid nor Medicare & Medicaid population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the neither Medicaid nor Medicare & Medicaid population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the neither Medicaid nor Medicare & Medicaid population?		If other, explain the deviation in the next cell:	
F. Additional Notes:			

Follow-up Care for Children Prescribed Attention-Deficit Hyperactivity Disorder (ADHD) Medication (ADD-BH)

Based on a measure stewarded by the National Committee for Quality Assurance (NQF #0108, Medicaid Child and Adolescent Core Set)

A. Measurement Year:

Insert measurement year based on CCBHC or non-CCBHC status. For CCBHCs, enter DY1 or DY2. For non-CCBHCs, enter year such as FY2017.

B. Data Source:

Select the data source type:

If administrative data only, select source (Medicaid Management Information System (MMIS) or Other):

<input type="text"/>
<input type="text"/>
<input type="text"/>

If other administrative data, specify data source:

If source other than administrative selected, provide source:

C. Date Range:

Index Prescription Start Date (IPSD):

Denominator Start Date (mm/dd/yyyy)

<input type="text"/>
<input type="text"/>

Denominator End Date (mm/dd/yyyy)

Negative Medication History Review:

Denominator Start Date (mm/dd/yyyy)

<input type="text"/>
<input type="text"/>

Denominator End Date (mm/dd/yyyy)

Initiation Phase:

Numerator Start Date (mm/dd/yyyy)

<input type="text"/>
<input type="text"/>

Numerator End Date (mm/dd/yyyy)

Continuation and Maintenance Phase:

Numerator Start Date (mm/dd/yyyy)

<input type="text"/>
<input type="text"/>

Numerator End Date (mm/dd/yyyy)

D. Performance Measure:

Percentage of children newly prescribed attention-deficit/hyperactivity disorder (ADHD) medication who had at least three follow-up care visits within a 10-month period, one of which was within 30 days of when the first ADHD medication was dispensed. Two rates are reported.

Initiation Phase: Percentage of children ages 6 to 12 as of the Index Prescription Start Date (IPSD) with an ambulatory prescription dispensed for ADHD medication who had one follow-up visit with practitioner with prescribing authority during the 30-day Initiation Phase.

Continuation and Maintenance (C&M) Phase: Percentage of children 6 to 12 years old as of the IPSD with an ambulatory prescription dispensed for ADHD medication who remained on the medication for at least 210 days and, in addition to the visit in the Initiation Phase, had at least two follow-up visits with a practitioner within 270 days (9 months) after the Initiation Phase ended.

For each of those rates, the measure is stratified to report by the Medicaid, Medicare & Medicaid, other, and total population.

Measure	Numerator	Denominator	Rate
Initiation Phase			
Medicaid			
Medicare & Medicaid			
Other			
Total	0	0	
Continuation & Maintenance Phase			
Medicaid			
Medicare & Medicaid			
Other			
Total	0	0	
E. Adherence to Measure Specifications:			
Population included in the denominator (indicate yes or no for each of the options below):			
Medicaid population			
Title XIX-eligible CHIP population			
Title XXI-eligible CHIP population			
Other CHIP enrollees			
Medicare population			
Medicare and Medicaid Dually-Eligible population			
VHA/TRICARE population			

Commercially insured population			
Uninsured population			
Other		If Other, explain whether the denominator is a subset of definitions selected above, please further define the denominator, and indicate the number of consumers excluded:	
Did your calculation of the measure deviate from the measure specification in any way?		If Yes, the measure differs: Explain how the calculation differed and why.	
Does this denominator represent your total measure eligible population as defined by the Technical Specifications for this measure?		If No, the denominator doesn't represent your total eligible population, explain which populations are excluded and why in the next cell:	
Specify the size of the population included in the denominator:		Specify the size of the measure-eligible population.	
Provide the following information for each rate/stratification:			
Initiation Phase Treatment:			
Medicaid Population:			
Did the numerator differ for the Medicaid population?		If numerator differs, explain the deviation in the next cell:	

Did the denominator differ for the Medicaid population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the Medicaid population?		If other, explain the deviation in the next cell:	
Medicare & Medicaid Population:			
Did the numerator differ for the Medicare & Medicaid population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the Medicare & Medicaid population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the Medicare & Medicaid population?		If other, explain the deviation in the next cell:	
Neither Medicaid nor Medicare & Medicaid Population:			
Did the numerator differ for the neither Medicaid nor Medicare & Medicaid population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the neither Medicaid nor Medicare & Medicaid population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the neither Medicaid nor Medicare & Medicaid population?		If other, explain the deviation in the next cell:	
Total Eligible Population:			
Did the numerator differ for the Total Eligible population?		If numerator differs, explain the deviation in the next cell:	

Did the denominator differ for the Total Eligible population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the Total Eligible population?		If other, explain the deviation in the next cell:	
C&M Phase Treatment:			
Medicaid Population:			
Did the numerator differ for the Medicaid population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the Medicaid population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the Medicaid population?		If other, explain the deviation in the next cell:	
Medicare & Medicaid Population:			
Did the numerator differ for the Medicare & Medicaid population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the Medicare & Medicaid population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the Medicare & Medicaid population?		If other, explain the deviation in the next cell:	
Neither Medicaid nor Medicare & Medicaid Population:			
Did the numerator differ for the neither Medicaid nor Medicare & Medicaid population?		If numerator differs, explain the deviation in the next cell:	

Did the denominator differ for the neither Medicaid nor Medicare & Medicaid population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the neither Medicaid nor Medicare & Medicaid population?		If other, explain the deviation in the next cell:	
Total Eligible Population:			
Did the numerator differ for the Total Eligible population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the Total Eligible population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the Total Eligible population?		If other, explain the deviation in the next cell:	
F. Additional Notes:			

Antidepressant Medication Management (AMM-BH)			
Based on a measure stewarded by the National Committee for Quality Assurance (NQF #0105, HEDIS 2016, Medicaid Adult Core Set)			
A. Measurement Year:			
Insert measurement year based on CCBHC or non-CCBHC status. For CCBHCs, enter DY1 or DY2. For non-CCBHCs, enter year such as FY2017.			
B. Data Source:			
Select the data source type:			
If administrative data only, select source (Medicaid Management Information System (MMIS) or Other):			If other administrative data, specify data source:
If source other than administrative selected, provide source:			
C. Date Range:			
Index Prescription Start Date (IPSD):			
Denominator Start Date (mm/dd/yyyy)			
Denominator End Date (mm/dd/yyyy)			
Negative Medication History Review:			
Denominator Start Date (mm/dd/yyyy)			
Denominator End Date (mm/dd/yyyy)			
Acute Phase:			
Numerator Start Date (mm/dd/yyyy)			
Numerator End Date (mm/dd/yyyy)			
Continuation Phase:			
Numerator Start Date (mm/dd/yyyy)			
Numerator End Date (mm/dd/yyyy)			
D. Performance Measure:			

The percentage of consumers age 18 and older who were treated with antidepressant medication, had a diagnosis of Major Depression and who remained on an antidepressant medication treatment. Two rates are reported:
 1. Effective Acute Phase Treatment. Percentage of consumers who remained on an antidepressant medication for at least 84 days (12 weeks).
 2. Effective Continuation Phase Treatment. Percentage of consumers who remained on an antidepressant medication for at least 180 days (6 months).

For each of those rates, the measure is stratified to report by age (18-64 years, 65 and older), and by the Medicaid, Medicare & Medicaid, and other population.

Measure	Numerator	Denominator	Rate
Acute Phase			
18-64 years	0	0	
Medicaid			
Medicare & Medicaid			
Other			
65+ years	0	0	
Medicaid			
Medicare & Medicaid			
Other			
Continuation & Maintenance Phase			
18-64 years	0	0	
Medicaid			
Medicare & Medicaid			
Other			
65+ years	0	0	
Medicaid			
Medicare & Medicaid			
Other			

E. Adherence to Measure Specifications:

Population included in the denominator (indicate yes or no for each of the options below):

Medicaid population	
Title XIX-eligible CHIP population	
Title XXI-eligible CHIP population	

Other CHIP enrollees			
Medicare population			
Medicare and Medicaid Dually-Eligible population			
VHA/TRICARE population			
Commercially insured population			
Uninsured population			
Other		If Other, explain whether the denominator is a subset of definitions selected above, please further define the denominator, and indicate the number of consumers excluded:	
Did your calculation of the measure deviate from the measure specification in any way?		If Yes, the measure differs: Explain how the calculation differed and why.	
Does this denominator represent your total measure eligible population as defined by the Technical Specifications for this measure?		If No, the denominator doesn't represent your total eligible population, explain which populations are excluded and why in the next cell:	
Specify the size of the population included in the denominator:		Specify the size of the measure-eligible population.	
Provide the following information for each rate/stratification:			
Acute Phase Treatment:			
Age Range: 18-64 years			

Did the numerator differ for the 18-64 years age range?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the 18-64 years age range?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the 18-64 years age range?		If other, explain the deviation in the next cell:	
Age Range: 65+ years			
Did the numerator differ for the 65+ years age range?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the 65+ years age range?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the 65+ years age range?		If other, explain the deviation in the next cell:	
Medicaid Population:			
Did the numerator differ for the Medicaid population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the Medicaid population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the Medicaid population?		If other, explain the deviation in the next cell:	
Medicare & Medicaid Population:			
Did the numerator differ for the Medicare & Medicaid population?		If numerator differs, explain the deviation in the next cell:	

Did the denominator differ for the Medicare & Medicaid population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the Medicare & Medicaid population?		If other, explain the deviation in the next cell:	
Neither Medicaid nor Medicare & Medicaid Population:			
Did the numerator differ for the neither Medicaid nor Medicare & Medicaid population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the neither Medicaid nor Medicare & Medicaid population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the neither Medicaid nor Medicare & Medicaid population?		If other, explain the deviation in the next cell:	
Continuation and Maintenance Phase Treatment:			
Age Range: 18-64 years			
Did the numerator differ for the 18-64 years age range?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the 18-64 years age range?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the 18-64 years age range?		If other, explain the deviation in the next cell:	
Age Range: 65+ years			
Did the numerator differ for the 65+ years age range?		If numerator differs, explain the deviation in the next cell:	

Did the denominator differ for the 65+ years age range?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the 65+ years age range?		If other, explain the deviation in the next cell:	
Medicaid Population:			
Did the numerator differ for the Medicaid population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the Medicaid population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the Medicaid population?		If other, explain the deviation in the next cell:	
Medicare & Medicaid Population:			
Did the numerator differ for the Medicare & Medicaid population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the Medicare & Medicaid population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the Medicare & Medicaid population?		If other, explain the deviation in the next cell:	
Neither Medicaid nor Medicare & Medicaid Population:			
Did the numerator differ for the neither Medicaid nor Medicare & Medicaid population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the neither Medicaid nor Medicare & Medicaid population?		If denominator differs, explain the deviation in the next cell:	

Did the calculation differ in some other way for the neither Medicaid nor Medicare & Medicaid population?		If other, explain the deviation in the next cell:	
F. Additional Notes:			

Initiation and Engagement of Alcohol and Other Drug Dependence Treatment (IET-BH)

Based on a measure stewarded by the National Committee for Quality Assurance (NQF #0004, HEDIS 2016)

A. Measurement Year:

Insert measurement year based on CCBHC or non-CCBHC status. For CCBHCs, enter DY1 or DY2. For non-CCBHCs, enter year such as FY2017.

B. Data Source:

Select the data source type:

If administrative data only, select source (Medicaid Management Information System (MMIS) or Other):

If other administrative data, specify data source:

If source other than administrative selected, provide source:

C. Date Range:

Index Episode Start Date (IESD):

Denominator Start Date (mm/dd/yyyy)

Denominator End Date (mm/dd/yyyy)

Negative Diagnosis History Review:

Denominator Start Date (mm/dd/yyyy)

Denominator End Date (mm/dd/yyyy)

Initiation of AOD Treatment:

Numerator Start Date (mm/dd/yyyy)

Numerator End Date (mm/dd/yyyy)

Engagement of AOD Treatment:

Numerator Start Date (mm/dd/yyyy)

Numerator End Date (mm/dd/yyyy)

D. Performance Measure:

The percentage of consumers age 13 and older with a new episode of alcohol or other drug (AOD) dependence who received the following:

1. Initiated treatment through an inpatient AOD admission, outpatient visit, intensive outpatient encounter or partial hospitalization within 14 days of the diagnosis
2. Initiated treatment and who had two or more additional services with a diagnosis of AOD within 30 days of the initiation visit

For each of those rates, the measure is stratified to report by age (13-17, 18-64, 65 and older), and by the Medicaid, Medicare & Medicaid, and other population.

Measure	Numerator	Denominator	Rate
Initiation of AOD Treatment			
13-17 years	0	0	
Medicaid			
Medicare & Medicaid			
Other			
18-64 years	0	0	
Medicaid			
Medicare & Medicaid			
Other			
65+ years	0	0	
Medicaid			
Medicare & Medicaid			
Other			
Engagement of AOD Treatment			
13-17 years	0	0	
Medicaid			
Medicare & Medicaid			
Other			
18-64 years	0	0	
Medicaid			
Medicare & Medicaid			
Other			
65+ years	0	0	

Medicaid			
Medicare & Medicaid			
Other			
E. Adherence to Measure Specifications:			
Population included in the denominator (indicate yes or no for each of the options below):			
Medicaid population			
Title XIX-eligible CHIP population			
Title XXI-eligible CHIP population			
Other CHIP enrollees			
Medicare population			
Medicare and Medicaid Dually-Eligible population			
VHA/TRICARE population			
Commercially insured population			
Uninsured population			
Other			
Did your calculation of the measure deviate from the measure specification in any way?		If Yes, the measure differs: Explain how the calculation differed and why.	
Does this denominator represent your total measure eligible population as defined by the Technical Specifications for this measure?		If No, the denominator doesn't represent your total eligible population, explain which populations are excluded and why in the next cell:	

Specify the size of the population included in the denominator:		Specify the size of the measure-eligible population.	
Provide the following information for each rate/stratification:			
Initiation of AOD Treatment:			
Age Range: 13-17 years			
Did the numerator differ for the 13-17 years age range?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the 13-17 years age range?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the 13-17 years age range?		If other, explain the deviation in the next cell:	
Age Range: 18-64 years			
Did the numerator differ for the 18-64 years age range?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the 18-64 years age range?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the 18-64 years age range?		If other, explain the deviation in the next cell:	
Age Range: 65+ years			
Did the numerator differ for the 65+ years age range?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the 65+ years age range?		If denominator differs, explain the deviation in the next cell:	

Did the calculation differ in some other way for the 65+ years age range?		If other, explain the deviation in the next cell:	
Medicaid Population:			
Did the numerator differ for the Medicaid population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the Medicaid population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the Medicaid population?		If other, explain the deviation in the next cell:	
Medicare & Medicaid Population:			
Did the numerator differ for the Medicare & Medicaid population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the Medicare & Medicaid population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the Medicare & Medicaid population?		If other, explain the deviation in the next cell:	
Neither Medicaid nor Medicare & Medicaid Population:			
Did the numerator differ for the neither Medicaid nor Medicare & Medicaid population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the neither Medicaid nor Medicare & Medicaid population?		If denominator differs, explain the deviation in the next cell:	

Did the calculation differ in some other way for the neither Medicaid nor Medicare & Medicaid population?		If other, explain the deviation in the next cell:	
Engagement of AOD Treatment:			
Age Range: 13-17 years			
Did the numerator differ for the 13-17 years age range?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the 13-17 years age range?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the 13-17 years age range?		If other, explain the deviation in the next cell:	
Age Range: 18-64 years			
Did the numerator differ for the 18-64 years age range?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the 18-64 years age range?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the 18-64 years age range?		If other, explain the deviation in the next cell:	
Age Range: 65+ years			
Did the numerator differ for the 65+ years age range?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the 65+ years age range?		If denominator differs, explain the deviation in the next cell:	

Did the calculation differ in some other way for the 65+ years age range?		If other, explain the deviation in the next cell:	
Medicaid Population:			
Did the numerator differ for the Medicaid population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the Medicaid population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the Medicaid population?		If other, explain the deviation in the next cell:	
Medicare & Medicaid Population:			
Did the numerator differ for the Medicare & Medicaid population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the Medicare & Medicaid population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the Medicare & Medicaid population?		If other, explain the deviation in the next cell:	
Neither Medicaid nor Medicare & Medicaid Population:			
Did the numerator differ for the neither Medicaid nor Medicare & Medicaid population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the neither Medicaid nor Medicare & Medicaid population?		If denominator differs, explain the deviation in the next cell:	

Did the calculation differ in some other way for the neither Medicaid nor Medicare & Medicaid population?		If other, explain the deviation in the next cell:	
F. Additional Notes:			

State-Lead Measures Not Required for the CCBHC Demonstration Program

State Name:	
BHC Name:	
BHC Identifier:	

Suicide Attempts (SU-A)

A SAMHSA-Developed Metric

A. Measurement Year:

Insert measurement year based on CCBHC or non-CCBHC status. For CCBHCs, enter DY1 or DY2. For non-CCBHCs, enter year such as FY2017.

B. Data Source:

Select the data source type:

If administrative data only, select source (Medicaid Management Information System (MMIS) or Other):

If source other than administrative selected, provide source:

If other administrative data, specify data source:

C. Date Range:

Denominator Start Date (mm/dd/yyyy)

Denominator End Date (mm/dd/yyyy)

Numerator Start Date (mm/dd/yyyy)

Numerator End Date (mm/dd/yyyy)

D. Performance Measure:

The percentage of consumers aged 12 years and older who attempted suicide during the measurement year, where the suicide attempt resulted in injury requiring medical services

The measure is stratified to report by age (12-17 years, 18-64 years, 65 years and older, and total (all age groups)), and by the Medicaid, Medicare & Medicaid, other, and total population.

Measure	Numerator	Denominator	Rate
12-17 years	0	0	
Medicaid			
Medicare & Medicaid			
Other			
18-64 years	0	0	
Medicaid			
Medicare & Medicaid			
Other			

65+ years	0	0	
Medicaid			
Medicare & Medicaid			
Other			
Total (all age groups)	0	0	
Medicaid	0	0	
Medicare & Medicaid	0	0	
Other	0	0	

E. Adherence to Measure Specifications:

Population included in the denominator (indicate yes or no for each of the options below):			
Medicaid population			
Title XIX-eligible CHIP population			
Title XXI-eligible CHIP population			
Other CHIP enrollees			
Medicare population			
Medicare and Medicaid Dually-Eligible population			
VHA/TRICARE population			
Commercially insured population			
Uninsured population			
Other			

<p>Did your calculation of the measure deviate from the measure specification in any way?</p>		<p>If Yes, the measure differs: Explain how the calculation differed and why.</p>	
<p>Does this denominator represent your total measure eligible population as defined by the Technical Specifications for this measure?</p>		<p>If No, the denominator doesn't represent your total eligible population, explain which populations are excluded and why in the next cell:</p>	
<p>Specify the size of the population included in the denominator:</p>		<p>Specify the size of the measure-eligible population.</p>	
<p>Provide the following information for each rate/stratification:</p>			
<p>Age Range: 12-17 years</p>			
<p>Did the numerator differ for the 12-17 years age range?</p>		<p>If numerator differs, explain the deviation in the next cell:</p>	
<p>Did the denominator differ for the 12-17 years age range?</p>		<p>If denominator differs, explain the deviation in the next cell:</p>	
<p>Did the calculation differ in some other way for the 12-17 years age range?</p>		<p>If other, explain the deviation in the next cell:</p>	
<p>Age Range: 18-64 years</p>			
<p>Did the numerator differ for the 18-64 years age range?</p>		<p>If numerator differs, explain the deviation in the next cell:</p>	

Did the denominator differ for the 18-64 years age range?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the 18-64 years age range?		If other, explain the deviation in the next cell:	
Age Range: 65+ years			
Did the numerator differ for the 65+ years age range?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the 65+ years age range?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the 65+ years age range?		If other, explain the deviation in the next cell:	
Medicaid Population:			
Did the numerator differ for the Medicaid population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the Medicaid population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the Medicaid population?		If other, explain the deviation in the next cell:	
Medicare & Medicaid Population:			
Did the numerator differ for the Medicare & Medicaid population?		If numerator differs, explain the deviation in the next cell:	

Did the denominator differ for the Medicare & Medicaid population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the Medicare & Medicaid population?		If other, explain the deviation in the next cell:	
Neither Medicaid nor Medicare & Medicaid Population:			
Did the numerator differ for the neither Medicaid nor Medicare & Medicaid population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the neither Medicaid nor Medicare & Medicaid population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the neither Medicaid nor Medicare & Medicaid population?		If other, explain the deviation in the next cell:	
Total Eligible Population:			
Did the numerator differ for the Total Eligible population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the Total Eligible population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the Total Eligible population?		If other, explain the deviation in the next cell:	

F. Additional Notes:

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Diabetes Care For People With Serious Mental Illness: Hemoglobin A1c (Hba1c) Poor Control (>9.0%) (SMI-PC)

Based on a measure stewarded by the National Committee for Quality Assurance (NQF #2607)

A. Measurement Year:

Insert measurement year based on CCBHC or non-CCBHC status. For CCBHCs, enter DY1 or DY2. For non-CCBHCs, enter year such as FY2017.

B. Data Source:

Select the data source type:

If administrative data only, select source (Medicaid Management Information System (MMIS) or Other):

If other administrative data, specify data source:

If source other than administrative selected, provide source:

C. Date Range:

Denominator Start Date (mm/dd/yyyy)

Denominator End Date (mm/dd/yyyy)

Numerator Start Date (mm/dd/yyyy)

Numerator End Date (mm/dd/yyyy)

D. Performance Measure:

The percentage of consumers 18-75 years of age with a serious mental illness and diabetes (type 1 and type 2) whose most recent Hemoglobin A1c (HbA1c) level during the measurement year is >9.0%.

The measure is stratified to report Medicaid, Medicare & Medicaid, other, and total population.

Measure	Numerator	Denominator	Rate
Medicaid			
Medicare & Medicaid			
Other			
Total		0	0

E. Adherence to Measure Specifications:

Population included in the denominator (indicate yes or no for each of the options below):

Medicaid population	
Title XIX-eligible CHIP population	

Title XXI-eligible CHIP population			
Other CHIP enrollees			
Medicare population			
Medicare and Medicaid Dually-Eligible population			
VHA/TRICARE population			
Commercially insured population			
Uninsured population			
Other		If Other, explain whether the denominator is a subset of definitions selected above, please further define the denominator, and indicate the number of consumers excluded:	
Did your calculation of the measure deviate from the measure specification in any way?		If Yes, the measure differs: Explain how the calculation differed and why.	
Does this denominator represent your total measure eligible population as defined by the Technical Specifications for this measure?		If No, the denominator doesn't represent your total eligible population, explain which populations are excluded and why in the next cell:	
Specify the size of the population included in the denominator:		Specify the size of the measure-eligible population.	
Provide the following information for each rate/stratification:			
Medicaid Population:			

Did the numerator differ for the Medicaid population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the Medicaid population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the Medicaid population?		If other, explain the deviation in the next cell:	
Medicare & Medicaid Population:			
Did the numerator differ for the Medicare & Medicaid population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the Medicare & Medicaid population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the Medicare & Medicaid population?		If other, explain the deviation in the next cell:	
Neither Medicaid nor Medicare & Medicaid Population:			
Did the numerator differ for the neither Medicaid nor Medicare & Medicaid population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the neither Medicaid nor Medicare & Medicaid population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the neither Medicaid nor Medicare & Medicaid population?		If other, explain the deviation in the next cell:	
Total Eligible Population:			
Did the numerator differ for the Total Eligible population?		If numerator differs, explain the deviation in the next cell:	

Did the denominator differ for the Total Eligible population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the Total Eligible population?		If other, explain the deviation in the next cell:	
F. Additional Notes:			

Metabolic Monitoring for Children and Adolescents on Antipsychotics (APM)

Based on a measure stewarded by the National Committee for Quality Assurance (HEDIS 2016)

A. Measurement Year:

Insert measurement year based on CCBHC or non-CCBHC status. For CCBHCs, enter DY1 or DY2. For non-CCBHCs, enter year such as FY2017.

B. Data Source:

Select the data source type:

If administrative data only, select source (Medicaid Management Information System (MMIS) or Other):

If source other than administrative selected, provide source:

If other administrative data, specify data source:

C. Date Range:

Denominator Start Date (mm/dd/yyyy)

Denominator End Date (mm/dd/yyyy)

Numerator Start Date (mm/dd/yyyy)

Numerator End Date (mm/dd/yyyy)

D. Performance Measure:

The percentage of children and adolescents aged 1-17 years who had two or more antipsychotic prescriptions and had metabolic testing

The measure is stratified to report by age (1-5 years, 6-11, 12-17, and total), and by the Medicaid, Medicare & Medicaid, other, and total population.

Measure	Numerator	Denominator	Rate
1-5 years	0	0	
Medicaid			
Medicare & Medicaid			
Other			
6-11 years	0	0	
Medicaid			
Medicare & Medicaid			
Other			
12-17 years	0	0	

Medicaid			
Medicare & Medicaid			
Other			
Total (all age groups)	0	0	
Medicaid	0	0	
Medicare & Medicaid	0	0	
Other	0	0	
E. Adherence to Measure Specifications:			
Population included in the denominator (indicate yes or no for each of the options below):			
Medicaid population			
Title XIX-eligible CHIP population			
Title XXI-eligible CHIP population			
Other CHIP enrollees			
Medicare population			
Medicare and Medicaid Dually-Eligible population			
VHA/TRICARE population			
Commercially insured population			
Uninsured population			
Other			
Did your calculation of the measure deviate from the measure specification in any way?		If Yes, the measure differs: Explain how the calculation differed and why.	

Does this denominator represent your total measure eligible population as defined by the Technical Specifications for this measure?		If No, the denominator doesn't represent your total eligible population , explain which populations are excluded and why in the next cell:	
Specify the size of the population included in the denominator:		Specify the size of the measure-eligible population.	
Provide the following information for each rate/stratification:			
Age Range: 1-5 years			
Did the numerator differ for the 1-5 years age range?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the 1-5 years age range?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the 1-5 years age range?		If other, explain the deviation in the next cell:	
Age Range: 6-11 years			
Did the numerator differ for the 6-11 years age range?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the 6-11 years age range?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the 6-11 years age range?		If other, explain the deviation in the next cell:	
Age Range: 12-17 years			
Did the numerator differ for the 12-17 years age range?		If numerator differs, explain the deviation in the next cell:	

Did the denominator differ for the 12-17 years age range?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the 12-17 years age range?		If other, explain the deviation in the next cell:	
Medicaid Population:			
Did the numerator differ for the Medicaid population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the Medicaid population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the Medicaid population?		If other, explain the deviation in the next cell:	
Medicare & Medicaid Population:			
Did the numerator differ for the Medicare & Medicaid population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the Medicare & Medicaid population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the Medicare & Medicaid population?		If other, explain the deviation in the next cell:	
Neither Medicaid nor Medicare & Medicaid Population:			
Did the numerator differ for the neither Medicaid nor Medicare & Medicaid population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the neither Medicaid nor Medicare & Medicaid population?		If denominator differs, explain the deviation in the next cell:	

Did the calculation differ in some other way for the neither Medicaid nor Medicare & Medicaid population?		If other, explain the deviation in the next cell:	
Total Eligible Population:			
Did the numerator differ for the Total Eligible population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the Total Eligible population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the Total Eligible population?		If other, explain the deviation in the next cell:	
F. Additional Notes:			

Cardiovascular Monitoring for People With Cardiovascular Disease and Schizophrenia (SMC)

Based on measure stewarded by the National Committee for Quality Assurance (NQF #1933, HEDIS 2016)

A. Measurement Year:

Insert measurement year based on CCBHC or non-CCBHC status. For CCBHCs, enter DY1 or DY2. For non-CCBHCs, enter year such as FY2017.

B. Data Source:

Select the data source type:
 If administrative data only, select source (Medicaid Management Information System (MMIS) or Other):

If source other than administrative selected, provide source:

If other administrative data, specify data source:

C. Date Range:

Denominator Start Date (mm/dd/yyyy)

Denominator End Date (mm/dd/yyyy)

Numerator Start Date (mm/dd/yyyy)

Numerator End Date (mm/dd/yyyy)

D. Performance Measure:

The percentage of consumers 18-64 years of age with Schizophrenia and cardiovascular disease, who had an LDL-C test during the measurement year

The measure is stratified to report Medicaid, Medicare & Medicaid, other, and total population.

Measure	Numerator	Denominator	Rate
Medicaid			
Medicare & Medicaid			
Other			
Total	0	0	

E. Adherence to Measure Specifications:

Population included in the denominator (indicate yes or no for each of the options below):			
Medicaid population			
Title XIX-eligible CHIP population			
Title XXI-eligible CHIP population			
Other CHIP enrollees			
Medicare population			
Medicare and Medicaid Dually-Eligible population			
VHA/TRICARE population			
Commercially insured population			
Uninsured population			
Other		If Other, explain whether the denominator is a subset of definitions selected above, please further define the denominator, and indicate the number of consumers excluded:	
Did your calculation of the measure deviate from the measure specification in any way?		If Yes, the measure differs: Explain how the calculation differed and why.	
Does this denominator represent your total measure eligible population as defined by the Technical Specifications for this measure?		If No, the denominator doesn't represent your total eligible population, explain which populations are excluded and why in the next cell:	

Specify the size of the population included in the denominator:		Specify the size of the measure-eligible population.	
Provide the following information for each rate/stratification:			
Medicaid Population:			
Did the numerator differ for the Medicaid population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the Medicaid population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the Medicaid population?		If other, explain the deviation in the next cell:	
Medicare & Medicaid Population:			
Did the numerator differ for the Medicare & Medicaid population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the Medicare & Medicaid population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the Medicare & Medicaid population?		If other, explain the deviation in the next cell:	
Neither Medicaid nor Medicare & Medicaid Population:			
Did the numerator differ for the neither Medicaid nor Medicare & Medicaid population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the neither Medicaid nor Medicare & Medicaid population?		If denominator differs, explain the deviation in the next cell:	

Did the calculation differ in some other way for the neither Medicaid nor Medicare & Medicaid population?		If other, explain the deviation in the next cell:	
Total Eligible Population:			
Did the numerator differ for the Total Eligible population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the Total Eligible population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the Total Eligible population?		If other, explain the deviation in the next cell:	
F. Additional Notes:			

Adherence to Mood Stabilizers for Individuals with Bipolar I Disorder (AMS-BD)

Based on a measure stewarded by the Centers for Medicare & Medicaid Services (NQF #1880)

A. Measurement Year:

Insert measurement year based on CCBHC or non-CCBHC status. For CCBHCs, enter DY1 or DY2. For non-CCBHCs, enter year such as FY2017.

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B. Data Source:

Select the data source type:

If administrative data only, select source (Medicaid Management Information System (MMIS) or Other):

If other administrative data, specify data source:

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If source other than administrative selected, provide source:

C. Date Range:

Denominator Start Date (mm/dd/yyyy)

Denominator End Date (mm/dd/yyyy)

Numerator Start Date (mm/dd/yyyy)

Numerator End Date (mm/dd/yyyy)

D. Performance Measure:

The percentage of consumers at least 18 years of age as of the beginning of the measurement period with Bipolar I Disorder who had at least two prescription drug claims for mood stabilizer medications and had a Proportion of Days Covered (PDC) of at least 0.8 for mood stabilizer medications during the measurement period (12 consecutive months).

The measure is stratified to report Medicaid, Medicare & Medicaid, other, and total population.

Measure	Numerator	Denominator	Rate
Medicaid			
Medicare & Medicaid			
Other			
Total		0	0

E. Adherence to Measure Specifications:

Population included in the denominator (indicate yes or no for each of the options below):			
Medicaid population			
Title XIX-eligible CHIP population			
Title XXI-eligible CHIP population			
Other CHIP enrollees			
Medicare population			
Medicare and Medicaid Dually-Eligible population			
VHA/TRICARE population			
Commercially insured population			
Uninsured population			
Other			
Did your calculation of the measure deviate from the measure specification in any way?		If Yes, the measure differs: Explain how the calculation differed and why.	
Does this denominator represent your total measure eligible population as defined by the Technical Specifications for this measure?		If No, the denominator doesn't represent your total eligible population, explain which populations are excluded and why in the next cell:	

Specify the size of the population included in the denominator:		Specify the size of the measure-eligible population.	
Provide the following information for each rate/stratification:			
Medicaid Population:			
Did the numerator differ for the Medicaid population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the Medicaid population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the Medicaid population?		If other, explain the deviation in the next cell:	
Medicare & Medicaid Population:			
Did the numerator differ for the Medicare & Medicaid population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the Medicare & Medicaid population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the Medicare & Medicaid population?		If other, explain the deviation in the next cell:	
Neither Medicaid nor Medicare & Medicaid Population:			
Did the numerator differ for the neither Medicaid nor Medicare & Medicaid population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the neither Medicaid nor Medicare & Medicaid population?		If denominator differs, explain the deviation in the next cell:	

Did the calculation differ in some other way for the neither Medicaid nor Medicare & Medicaid population?		If other, explain the deviation in the next cell:	
Total Eligible Population:			
Did the numerator differ for the Total Eligible population?		If numerator differs, explain the deviation in the next cell:	
Did the denominator differ for the Total Eligible population?		If denominator differs, explain the deviation in the next cell:	
Did the calculation differ in some other way for the Total Eligible population?		If other, explain the deviation in the next cell:	
F. Additional Notes:			

Roll-up All Measures

BHC-Lead CCBHC-Required Measures

Time to Initial Evaluation (I-EVAL)

Metric #1: Percentage of New Clients with Initial Evaluation within 10 Business Days

Measure	Numerator	Denominator	Percentage
Age 12-17 years	0	0	
Medicaid	0	0	
Medicare & Medicaid	0	0	
Other	0	0	
Age 18+ years	0	0	
Medicaid	0	0	
Medicare & Medicaid	0	0	
Other	0	0	
Total (all age groups)	0	0	
Medicaid	0	0	
Medicare & Medicaid	0	0	
Other	0	0	

Metric #2: Mean Number of Days until Initial Evaluation

Measure	Numerator	Denominator	Mean
Age 12-17 years	0	0	
Medicaid	0	0	
Medicare & Medicaid	0	0	
Other	0	0	
Age 18+ years	0	0	
Medicaid	0	0	
Medicare & Medicaid	0	0	
Other	0	0	
Total (all age groups)	0	0	
Medicaid	0	0	
Medicare & Medicaid	0	0	
Other	0	0	

Preventive Care and Screening: Adult Body Mass Index (BMI) Screening and Follow-Up (BMI-SF)

Measure	Numerator	Denominator	Rate
Medicaid	0	0	
Medicare & Medicaid	0	0	
Other	0	0	
Total	0	0	

Weight Assessment for Children/Adolescents:Body Mass Index Assessment for Children/Adolescents (WCC-BH)

Measure	Numerator	Denominator	Rate
3-11 years			
Medicaid	0	0	
Medicare & Medicaid	0	0	
Other	0	0	
Total	0	0	

12-17 years			
Medicaid	0	0	
Medicare & Medicaid	0	0	
Other	0	0	
Total	0	0	

Preventive Care & Screening:Tobacco Use: Screening & Cessation Intervention (TSC)

CCBHC required measure

Measure	Numerator	Denominator	Rate
Medicaid	0	0	
Medicare & Medicaid	0	0	
Other	0	0	
Total	0	0	

Preventive Care and Screening: Unhealthy Alcohol Use: Screening & Brief Counseling (ASC)

Measure	Numerator	Denominator	Rate
Medicaid	0	0	

Medicare & Medicaid	0	0	
Other	0	0	
Total	0	0	

Child and Adolescent Major Depressive Disorder: Suicide Risk Assessment (SRA-BH-C)

Measure	Numerator	Denominator	Rate
Medicaid	0	0	
Medicare & Medicaid	0	0	
Other	0	0	
Total	0	0	

Adult Major Depressive Disorder (MDD): Suicide Risk Assessment (SRA-A)

Measure	Numerator	Denominator	Rate
Medicaid	0	0	
Medicare & Medicaid	0	0	
Other	0	0	
Total	0	0	

Screening for Clinical Depression and Follow-up Plan (CDF-BH)

Measure	Numerator	Denominator	Rate
12-17 years	0	0	
Medicaid	0	0	
Medicare & Medicaid	0	0	
Other	0	0	
18-64 years	0	0	
Medicaid	0	0	
Medicare & Medicaid	0	0	
Other	0	0	
65+ years	0	0	
Medicaid	0	0	
Medicare & Medicaid	0	0	
Other	0	0	

Depression Remission at Twelve Months (DEP-REM-12)

Measure	Numerator	Denominator	Rate
Medicaid	0	0	
Medicare & Medicaid	0	0	
Other	0	0	
Total	0	0	

Other BHC-Lead Measures

Routine Care Needs (ROUT)

Measure	Numerator	Denominator	Rate
Medicaid	0	0	
Medicare & Medicaid	0	0	
Other	0	0	
Total	0	0	

Time to Comprehensive Person- and Family-Centered Diagnostic and Treatment Planning Evaluation (TX-EVAL)

Measure	Numerator	Denominator	Mean
Age 12-17 years	0	0	
Medicaid	0	0	
Medicare & Medicaid	0	0	
Other	0	0	
Age 18+ years	0	0	
Medicaid	0	0	
Medicare & Medicaid	0	0	
Other	0	0	
Total (all age groups)	0	0	
Medicaid	0	0	
Medicare & Medicaid	0	0	
Other	0	0	

Deaths by Suicide (SUIC)

Measure	Numerator	Denominator	Rate
12-17 years	0	0	
Medicaid	0	0	
Medicare & Medicaid	0	0	
Other	0	0	
18-64 years	0	0	
Medicaid	0	0	
Medicare & Medicaid	0	0	
Other	0	0	
65 years and older	0	0	
Medicaid	0	0	
Medicare & Medicaid	0	0	
Other	0	0	
Total (all age groups)	0	0	
Medicaid	0	0	
Medicare & Medicaid	0	0	
Other	0	0	

Documentation of Current Medications in the Medical Record (DOC)

Measure	Numerator	Denominator	Rate
Medicaid	0	0	
Medicare & Medicaid	0	0	
Other	0	0	
Total	0	0	

Controlling High Blood Pressure (CBP-BH)

Measure	Numerator	Denominator	Rate
18-64 years	0	0	
Medicaid	0	0	
Medicare & Medicaid	0	0	
Other	0	0	
65-85 years	0	0	

Medicaid	0	0	
Medicare & Medicaid	0	0	
Other	0	0	

State-Lead CCBHC-Required Measures

Housing Status (HOU)

Living Situation	Numerator	Denominator	Percentage
Private residence	0	0	
Foster home	0	0	
Residential care	0	0	
Crisis residence	0	0	
Residential treatment center	0	0	
Institutional setting	0	0	
Jail (correctional facility)	0	0	
Homeless (shelter)	0	0	
Other	0	0	
Not Available	0	0	
Total	0	0	

Patient Experience of Care Survey (PEC)

[For this BHC, complete a copy of Tables 11 and 11a of the URS reporting template that is current at the time of the survey \(http://www.urs.gov\)](http://www.urs.gov)

Youth/Family Experience of Care Survey (Y/FEC)

[For this BHC, complete a copy of Tables 11 and 11a of the URS reporting template that is current at the time of the survey \(http://www.urs.gov\)](http://www.urs.gov)

Follow-up After Emergency Department Visit for Mental Illness (FUM)

Measure	Numerator	Denominator	Rate
ED MH Visits with 7 Day Follow-up			
Medicaid	0	0	
Medicare & Medicaid	0	0	
Other	0	0	
Total	0	0	
ED MH Visits with 30 Day Follow-up			
Medicaid	0	0	
Medicare & Medicaid	0	0	
Other	0	0	
Total	0	0	
Follow-up After Emergency Department Visit for Alcohol and Other Drug Dependence (FUA)			
Measure	Numerator	Denominator	Rate
ED AOD Visits with 7 Day Follow-up			
Medicaid	0	0	
Medicare & Medicaid	0	0	
Other	0	0	
Total	0	0	
ED AOD Visits with 30 Day Follow-up			
Medicaid	0	0	
Medicare & Medicaid	0	0	
Other	0	0	
Total	0	0	
Plan All-Cause Readmissions Rate (PCR-BH)			
Measure	Numerator	Denominator	Rate
18-64 years	0	0	
Medicaid	0	0	
Medicare & Medicaid	0	0	
Other	0	0	
65+ years	0	0	
Medicaid	0	0	

Medicare & Medicaid	0	0	
Other	0	0	

Diabetes Screening for People With Schizophrenia or Bipolar Disorder Who Are Using Antipsychotic Medications (SSD)

Measure	Numerator	Denominator	Rate
Medicaid	0	0	
Medicare & Medicaid	0	0	
Other	0	0	
Total	0	0	

Adherence to Antipsychotic Medications for Individuals With Schizophrenia (SAA-BH)

Measure	Numerator	Denominator	Rate
Medicaid	0	0	
Medicare & Medicaid	0	0	
Other	0	0	
Total	0	0	

Follow-up After Hospitalization for Mental Illness (FUH-BH-A)

Measure	Numerator	Denominator	Rate
30-Day Follow-up			
21-64 years	0	0	
Medicaid	0	0	
Medicare & Medicaid	0	0	
Other	0	0	
65+ years	0	0	
Medicaid	0	0	
Medicare & Medicaid	0	0	
Other	0	0	
7-Day Follow-up			
21-64 years	0	0	
Medicaid	0	0	
Medicare & Medicaid	0	0	

Other	0	0	
65+ years	0	0	
Medicaid	0	0	
Medicare & Medicaid	0	0	
Other	0	0	

Follow-Up After Hospitalization For Mental Illness (FUH-BH-C)

Measure	Numerator	Denominator	Rate
30-Day Follow-up			
Medicaid	0	0	
Medicare & Medicaid	0	0	
Other	0	0	
Total	0	0	

7-Day Follow-up			
Medicaid	0	0	
Medicare & Medicaid	0	0	
Other	0	0	
Total	0	0	

Follow-up Care for Children Prescribed Attention-Deficit Hyperactivity Disorder (ADHD) Medication (ADD-BH)

Measure	Numerator	Denominator	Rate
Initiation Phase			
Medicaid	0	0	
Medicare & Medicaid	0	0	
Other	0	0	
Total	0	0	

Continuation & Maintenance Phase			
Medicaid	0	0	
Medicare & Medicaid	0	0	
Other	0	0	
Total	0	0	

Antidepressant Medication Management (AMM-BH)

Measure	Numerator	Denominator	Rate
Acute Phase			
18-64 years	0	0	
Medicaid	0	0	
Medicare & Medicaid	0	0	
Other	0	0	
65+ years	0	0	
Medicaid	0	0	
Medicare & Medicaid	0	0	
Other	0	0	
Continuation and Maintenance Phase			
18-64 years	0	0	
Medicaid	0	0	
Medicare & Medicaid	0	0	
Other	0	0	
65+ years	0	0	
Medicaid	0	0	
Medicare & Medicaid	0	0	
Other	0	0	
Initiation and Engagement of Alcohol and Other Drug Dependence Treatment (IET-BH)			
Measure	Numerator	Denominator	Rate
Initiation of AOD Treatment			
13-17 years	0	0	
Medicaid	0	0	
Medicare & Medicaid	0	0	
Other	0	0	
18-64 years	0	0	
Medicaid	0	0	
Medicare & Medicaid	0	0	
Other	0	0	
65+ years	0	0	

Medicaid	0	0
Medicare & Medicaid	0	0
Other	0	0
Engagement of AOD Treatment		
13-17 years	0	0
Medicaid	0	0
Medicare & Medicaid	0	0
Other	0	0
18-64 years	0	0
Medicaid	0	0
Medicare & Medicaid	0	0
Other	0	0
65+ years	0	0
Medicaid	0	0
Medicare & Medicaid	0	0
Other	0	0

Other State-Lead Measures

Suicide Attempts (SU-A)

Measure	Numerator	Denominator	Rate
12-17 years	0	0	
Medicaid	0	0	
Medicare & Medicaid	0	0	
Other	0	0	
18-64 years	0	0	
Medicaid	0	0	
Medicare & Medicaid	0	0	
Other	0	0	
65 years and older	0	0	
Medicaid	0	0	
Medicare & Medicaid	0	0	
Other	0	0	
Total (all age groups)	0	0	

Medicaid	0	0	
Medicare & Medicaid	0	0	
Other	0	0	

Diabetes Care For People With Serious Mental Illness: Hemoglobin A1c (Hba1c) Poor Control (>9.0%) (SMI-PC)

Measure	Numerator	Denominator	Rate
Medicaid	0	0	
Medicare & Medicaid	0	0	
Other	0	0	
Total	0	0	

Metabolic Monitoring for Children and Adolescents on Antipsychotics (APM)

Measure	Numerator	Denominator	Rate
1-5 years	0	0	
Medicaid	0	0	
Medicare & Medicaid	0	0	
Other	0	0	
6-11 years	0	0	
Medicaid	0	0	
Medicare & Medicaid	0	0	
Other	0	0	
12-17 years	0	0	
Medicaid	0	0	
Medicare & Medicaid	0	0	
Other	0	0	
Total (all age groups)	0	0	
Medicaid	0	0	
Medicare & Medicaid	0	0	
Other	0	0	

Cardiovascular Monitoring for People With Cardiovascular Disease and Schizophrenia (SMC)

Measure	Numerator	Denominator	Rate
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Medicaid	0	0	
Medicare & Medicaid	0	0	
Other	0	0	
Total	0	0	

Adherence to Mood Stabilizers for Individuals with Bipolar I Disorder (AMS-BD)

Measure	Numerator	Denominator	Rate
Medicaid	0	0	
Medicare & Medicaid	0	0	
Other	0	0	
Total	0	0	

Table 1. BHC-Reported Measures Measurement Periods (MPs) for CCBHCs -- Demonstration Years (DY) 1 and 2

Factor and Time Period	Routine Care Needs (ROUT)	Time to Initial Evaluation (I-EVAL)	Time to Comprehensive Person- and Family-Centered Diagnostic and Treatment Planning Evaluation (TX-EVAL)
Denominator MP - DY1	July 1, 2016 – Dec. 31, 2017	July 1, 2016 – Dec. 1, 2017	July 1, 2016 – Oct. 2, 2017
Denominator MP - DY1	Aug. 1, 2016 – Jan. 31, 2018	Aug. 1, 2016 – Jan. 1, 2018	Aug. 1, 2016 – Nov. 2, 2017
Denominator MP - DY1	Sept. 1, 2016 – Feb. 28, 2018	Sept. 1, 2016 – Jan. 29, 2018	Sept. 1, 2016 – Nov. 30, 2017
Denominator MP - DY1	Oct. 1, 2016 – March 31, 2018	Oct. 1, 2016 – March 1, 2018	Oct. 1, 2016 – Dec. 31, 2017
Denominator MP - DY1	Nov. 1, 2016 – April 30, 2018	Nov. 1, 2016 – March 31, 2018	Nov. 1, 2016 – Jan. 30, 2018
Denominator MP - DY1	Dec. 1, 2016 – May 31, 2018	Dec. 1, 2016 – May 1, 2018	Dec. 1, 2016 – March 2, 2018
Denominator MP - DY1	Jan. 1, 2017 – June 30, 2018	Jan. 1, 2017 – May 31, 2018	Jan. 1, 2017 – April 1, 2018
Denominator MP - DY2	July 1, 2017 – Dec. 31, 2018	July 1, 2017 – Dec. 1, 2018	July 1, 2017 – Oct. 2, 2018
Denominator MP - DY2	Aug. 1, 2017 – Jan. 31, 2019	Aug. 1, 2017 – Jan. 1, 2019	Aug. 1, 2017 – Nov. 2, 2018
Denominator MP - DY2	Sept. 1, 2017 – Feb. 28, 2019	Sept. 1, 2017 – Jan. 29, 2019	Sept. 1, 2017 – Nov. 30, 2018
Denominator MP - DY2	Oct. 1, 2017 – March 31, 2019	Oct. 1, 2017 – March 1, 2019	Oct. 1, 2017 – Dec. 31, 2018
Denominator MP - DY2	Nov. 1, 2017 – April 30, 2019	Nov. 1, 2017 – March 31, 2019	Nov. 1, 2017 – Jan. 30, 2019
Denominator MP - DY2	Dec. 1, 2017 – May 31, 2019	Dec. 1, 2017 – May 1, 2019	Dec. 1, 2017 – March 2, 2019
Denominator MP - DY2	Jan. 1, 2018 – June 30, 2019	Jan. 1, 2018 – May 31, 2019	Jan. 1, 2018 – April 1, 2019
Numerator MP - DY1	Jan. 1, 2017 – Dec. 31, 2017	Jan. 1, 2017 – Dec. 31, 2017	Jan. 1, 2017 – Dec. 31, 2017
Numerator MP - DY1	Feb. 1, 2017 – Jan. 31, 2018	Feb. 1, 2017 – Jan. 31, 2018	Feb. 1, 2017 – Jan. 31, 2018
Numerator MP - DY1	March 1, 2017 – Feb. 28, 2018	March 1, 2017 – Feb. 28, 2018	March 1, 2017 – Feb. 28, 2018
Numerator MP - DY1	April 1, 2017 – March 31, 2018	April 1, 2017 – March 31, 2018	April 1, 2017 – March 31, 2018
Numerator MP - DY1	May 1, 2017 – April 30, 2018	May 1, 2017 – April 30, 2018	May 1, 2017 – April 30, 2018
Numerator MP - DY1	June 1, 2017 – May 31, 2018	June 1, 2017 – May 31, 2018	June 1, 2017 – May 31, 2018
Numerator MP - DY1	July 1, 2017 – June 30, 2018	July 1, 2017 – June 30, 2018	July 1, 2017 – June 30, 2018

Table 1. BHC-Reported Measures Measurement Periods (MPs) for CCBHCs -- Demonstration Years (DY) 1 and 2

Numerator MP - DY2	Jan. 1, 2018 - Dec. 31, 2018	Jan. 1, 2018 - Dec. 31, 2018	Jan. 1, 2018 - Dec. 31, 2018
Numerator MP - DY2	Feb. 1, 2018 - Jan. 31, 2019	Feb. 1, 2018 - Jan. 31, 2019	Feb. 1, 2018 - Jan. 31, 2019
Numerator MP - DY2	March 1, 2018 - Feb. 28, 2019	March 1, 2018 - Feb. 28, 2019	March 1, 2018 - Feb. 28, 2019
Numerator MP - DY2	April 1, 2018 - March 31, 2019	April 1, 2018 - March 31, 2019	April 1, 2018 - March 31, 2019
Numerator MP - DY2	May 1, 2018 - April 30, 2019	May 1, 2018 - April 30, 2019	May 1, 2018 - April 30, 2019
Numerator MP - DY2	June 1, 2018 - May 31, 2019	June 1, 2018 - May 31, 2019	June 1, 2018 - May 31, 2019
Numerator MP - DY2	July 1, 2018 - June 30, 2019	July 1, 2018 - June 30, 2019	July 1, 2018 - June 30, 2019

Table 1. BHC-Reported Mea

Factor and Time Period	Deaths by Suicide (SUIC)	Documentation of Current Medications in the Medical Record (DOC)	Preventive Care and Screening: Adult Body Mass Index (BMI) Screening and Follow-Up (BMI-SF)
Denominator MP - DY1	Jan. 1, 2017 - Dec. 31, 2017	Jan. 1, 2017 - Dec. 31, 2017	Jan. 1, 2017 - Dec. 31, 2017
Denominator MP - DY1	Feb. 1, 2017 - Jan. 31, 2018	Feb. 1, 2017 - Jan. 31, 2018	Feb. 1, 2017 - Jan. 31, 2018
Denominator MP - DY1	March 1, 2017 - Feb. 28, 2018	March 1, 2017 - Feb. 28, 2018	March 1, 2017 - Feb. 28, 2018
Denominator MP - DY1	April 1, 2017 - March 31, 2018	April 1, 2017 - March 31, 2018	April 1, 2017 - March 31, 2018
Denominator MP - DY1	May 1, 2017 - April 30, 2018	May 1, 2017 - April 30, 2018	May 1, 2017 - April 30, 2018
Denominator MP - DY1	June 1, 2017 - May 31, 2018	June 1, 2017 - May 31, 2018	June 1, 2017 - May 31, 2018
Denominator MP - DY1	July 1, 2017 - June 30, 2018	July 1, 2017 - June 30, 2018	July 1, 2017 - June 30, 2018
Denominator MP - DY2	Jan. 1, 2018 - Dec. 31, 2018	Jan. 1, 2018 - Dec. 31, 2018	Jan. 1, 2018 - Dec. 31, 2018
Denominator MP - DY2	Feb. 1, 2018 - Jan. 31, 2019	Feb. 1, 2018 - Jan. 31, 2019	Feb. 1, 2018 - Jan. 31, 2019
Denominator MP - DY2	March 1, 2018 - Feb. 28, 2019	March 1, 2018 - Feb. 28, 2019	March 1, 2018 - Feb. 28, 2019
Denominator MP - DY2	April 1, 2018 - March 31, 2019	April 1, 2018 - March 31, 2019	April 1, 2018 - March 31, 2019
Denominator MP - DY2	May 1, 2018 - April 30, 2019	May 1, 2018 - April 30, 2019	May 1, 2018 - April 30, 2019
Denominator MP - DY2	June 1, 2018 - May 31, 2019	June 1, 2018 - May 31, 2019	June 1, 2018 - May 31, 2019
Denominator MP - DY2	July 1, 2018 - June 30, 2019	July 1, 2018 - June 30, 2019	July 1, 2018 - June 30, 2019
Numerator MP - DY1	Jan. 1, 2017 - Dec. 31, 2017	Jan. 1, 2017 - Dec. 31, 2017	July 1, 2016 - Dec. 31, 2017
Numerator MP - DY1	Feb. 1, 2017 - Jan. 31, 2018	Feb. 1, 2017 - Jan. 31, 2018	Aug. 1, 2016 - Jan. 31, 2018
Numerator MP - DY1	March 1, 2017 - Feb. 28, 2018	March 1, 2017 - Feb. 28, 2018	Sept. 1, 2016 - Feb. 28, 2018
Numerator MP - DY1	April 1, 2017 - March 31, 2018	April 1, 2017 - March 31, 2018	Oct. 1, 2016 - March 31, 2018
Numerator MP - DY1	May 1, 2017 - April 30, 2018	May 1, 2017 - April 30, 2018	Nov. 1, 2016 - April 30, 2018
Numerator MP - DY1	June 1, 2017 - May 31, 2018	June 1, 2017 - May 31, 2018	Dec. 1, 2016 - May 31, 2018
Numerator MP - DY1	July 1, 2017 - June 30, 2018	July 1, 2017 - June 30, 2018	Jan. 1, 2017 - June 30, 2018

Table 1. BHC-Reported Mea

Numerator MP - DY2	Jan. 1, 2018 - Dec. 31, 2018	Jan. 1, 2018 - Dec. 31, 2018	July 1, 2017 - Dec. 31, 2018
Numerator MP - DY2	Feb. 1, 2018 - Jan. 31, 2019	Feb. 1, 2018 - Jan. 31, 2019	Aug. 1, 2017 - Jan. 31, 2019
Numerator MP - DY2	March 1, 2018 - Feb. 28, 2019	March 1, 2018 - Feb. 28, 2019	Sept. 1, 2017 - Feb. 28, 2019
Numerator MP - DY2	April 1, 2018 - March 31, 2019	April 1, 2018 - March 31, 2019	Oct. 1, 2017 - March 31, 2019
Numerator MP - DY2	May 1, 2018 - April 30, 2019	May 1, 2018 - April 30, 2019	Nov. 1, 2017 - April 30, 2019
Numerator MP - DY2	June 1, 2018 - May 31, 2019	June 1, 2018 - May 31, 2019	Dec. 1, 2017 - May 31, 2019
Numerator MP - DY2	July 1, 2018 - June 30, 2019	July 1, 2018 - June 30, 2019	Jan. 1, 2018 - June 30, 2019

Table 1. BHC-Reported Mea

Factor and Time Period	Weight Assessment for Children/Adolescents: Body Mass Index Assessment for Children/Adolescents (WCC-BH)	Controlling High Blood Pressure (CBP-BH)	Preventive Care & Screening: Tobacco Use: Screening & Cessation Intervention (TSC)
Denominator MP - DY1	Jan. 1, 2017 - Dec. 31, 2017	Jan. 1, 2017 - Dec. 31, 2017	Jan. 1, 2017 - Dec. 31, 2017
Denominator MP - DY1	Feb. 1, 2017 - Jan. 31, 2018	Feb. 1, 2017 - Jan. 31, 2018	Feb. 1, 2017 - Jan. 31, 2018
Denominator MP - DY1	March 1, 2017 - Feb. 28, 2018	March 1, 2017 - Feb. 28, 2018	March 1, 2017 - Feb. 28, 2018
Denominator MP - DY1	April 1, 2017 - March 31, 2018	April 1, 2017 - March 31, 2018	April 1, 2017 - March 31, 2018
Denominator MP - DY1	May 1, 2017 - April 30, 2018	May 1, 2017 - April 30, 2018	May 1, 2017 - April 30, 2018
Denominator MP - DY1	June 1, 2017 - May 31, 2018	June 1, 2017 - May 31, 2018	June 1, 2017 - May 31, 2018
Denominator MP - DY1	July 1, 2017 - June 30, 2018	July 1, 2017 - June 30, 2018	July 1, 2017 - June 30, 2018
Denominator MP - DY2	Jan. 1, 2018 - Dec. 31, 2018	Jan. 1, 2018 - Dec. 31, 2018	Jan. 1, 2018 - Dec. 31, 2018
Denominator MP - DY2	Feb. 1, 2018 - Jan. 31, 2019	Feb. 1, 2018 - Jan. 31, 2019	Feb. 1, 2018 - Jan. 31, 2019
Denominator MP - DY2	March 1, 2018 - Feb. 28, 2019	March 1, 2018 - Feb. 28, 2019	March 1, 2018 - Feb. 28, 2019
Denominator MP - DY2	April 1, 2018 - March 31, 2019	April 1, 2018 - March 31, 2019	April 1, 2018 - March 31, 2019
Denominator MP - DY2	May 1, 2018 - April 30, 2019	May 1, 2018 - April 30, 2019	May 1, 2018 - April 30, 2019
Denominator MP - DY2	June 1, 2018 - May 31, 2019	June 1, 2018 - May 31, 2019	June 1, 2018 - May 31, 2019
Denominator MP - DY2	July 1, 2018 - June 30, 2019	July 1, 2018 - June 30, 2019	July 1, 2018 - June 30, 2019
Numerator MP - DY1	Jan. 1, 2017 - Dec. 31, 2017	Jan. 1, 2017 - Dec. 31, 2017	Jan. 1, 2016 - Dec. 31, 2017
Numerator MP - DY1	Feb. 1, 2017 - Jan. 31, 2018	Feb. 1, 2017 - Jan. 31, 2018	Feb. 1, 2016 - Jan. 31, 2018
Numerator MP - DY1	March 1, 2017 - Feb. 28, 2018	March 1, 2017 - Feb. 28, 2018	March 1, 2016 - Feb. 28, 2018
Numerator MP - DY1	April 1, 2017 - March 31, 2018	April 1, 2017 - March 31, 2018	April 1, 2016 - March 31, 2018
Numerator MP - DY1	May 1, 2017 - April 30, 2018	May 1, 2017 - April 30, 2018	May 1, 2016 - April 30, 2018
Numerator MP - DY1	June 1, 2017 - May 31, 2018	June 1, 2017 - May 31, 2018	June 1, 2016 - May 31, 2018
Numerator MP - DY1	July 1, 2017 - June 30, 2018	July 1, 2017 - June 30, 2018	July 1, 2016 - June 30, 2018

Table 1. BHC-Reported Mea

Numerator MP - DY2	Jan. 1, 2018 - Dec. 31, 2018	Jan. 1, 2018 - Dec. 31, 2018	Jan. 1, 2017 - Dec. 31, 2018
Numerator MP - DY2	Feb. 1, 2018 - Jan. 31, 2019	Feb. 1, 2018 - Jan. 31, 2019	Feb. 1, 2017 - Jan. 31, 2019
Numerator MP - DY2	March 1, 2018 - Feb. 28, 2019	March 1, 2018 - Feb. 28, 2019	March 1, 2017 - Feb. 28, 2019
Numerator MP - DY2	April 1, 2018 - March 31, 2019	April 1, 2018 - March 31, 2019	April 1, 2017 - March 31, 2019
Numerator MP - DY2	May 1, 2018 - April 30, 2019	May 1, 2018 - April 30, 2019	May 1, 2017 - April 30, 2019
Numerator MP - DY2	June 1, 2018 - May 31, 2019	June 1, 2018 - May 31, 2019	June 1, 2017 - May 31, 2019
Numerator MP - DY2	July 1, 2018 - June 30, 2019	July 1, 2018 - June 30, 2019	July 1, 2017 - June 30, 2019

Table 1. BHC-Reported Mea

Factor and Time Period	Preventive Care and Screening: Unhealthy Alcohol Use: Screening & Brief Counseling (ASC)	Child and Adolescent Major Depressive Disorder: Suicide Risk Assessment (SRA-BH-C)	Adult Major Depressive Disorder (MDD): Suicide Risk Assessment (SRA-BH-A)
Denominator MP - DY1	Jan. 1, 2017 - Dec. 31, 2017	Jan. 1, 2017 - Dec. 31, 2017	Jan. 1, 2017 - Dec. 31, 2017
Denominator MP - DY1	Feb. 1, 2017 - Jan. 31, 2018	Feb. 1, 2017 - Jan. 31, 2018	Feb. 1, 2017 - Jan. 31, 2018
Denominator MP - DY1	March 1, 2017 - Feb. 28, 2018	March 1, 2017 - Feb. 28, 2018	March 1, 2017 - Feb. 28, 2018
Denominator MP - DY1	April 1, 2017 - March 31, 2018	April 1, 2017 - March 31, 2018	April 1, 2017 - March 31, 2018
Denominator MP - DY1	May 1, 2017 - April 30, 2018	May 1, 2017 - April 30, 2018	May 1, 2017 - April 30, 2018
Denominator MP - DY1	June 1, 2017 - May 31, 2018	June 1, 2017 - May 31, 2018	June 1, 2017 - May 31, 2018
Denominator MP - DY1	July 1, 2017 - June 30, 2018	July 1, 2017 - June 30, 2018	July 1, 2017 - June 30, 2018
Denominator MP - DY2	Jan. 1, 2018 - Dec. 31, 2018	Jan. 1, 2018 - Dec. 31, 2018	Jan. 1, 2018 - Dec. 31, 2018
Denominator MP - DY2	Feb. 1, 2018 - Jan. 31, 2019	Feb. 1, 2018 - Jan. 31, 2019	Feb. 1, 2018 - Jan. 31, 2019
Denominator MP - DY2	March 1, 2018 - Feb. 28, 2019	March 1, 2018 - Feb. 28, 2019	March 1, 2018 - Feb. 28, 2019
Denominator MP - DY2	April 1, 2018 - March 31, 2019	April 1, 2018 - March 31, 2019	April 1, 2018 - March 31, 2019
Denominator MP - DY2	May 1, 2018 - April 30, 2019	May 1, 2018 - April 30, 2019	May 1, 2018 - April 30, 2019
Denominator MP - DY2	June 1, 2018 - May 31, 2019	June 1, 2018 - May 31, 2019	June 1, 2018 - May 31, 2019
Denominator MP - DY2	July 1, 2018 - June 30, 2019	July 1, 2018 - June 30, 2019	July 1, 2018 - June 30, 2019
Numerator MP - DY1	Jan. 1, 2016 - Dec. 31, 2017	Jan. 1, 2017 - Dec. 31, 2017	Jan. 1, 2017 - Dec. 31, 2017
Numerator MP - DY1	Feb. 1, 2016 - Jan. 31, 2018	Feb. 1, 2017 - Jan. 31, 2018	Feb. 1, 2017 - Jan. 31, 2018
Numerator MP - DY1	March 1, 2016 - Feb. 28, 2018	March 1, 2017 - Feb. 28, 2018	March 1, 2017 - Feb. 28, 2018
Numerator MP - DY1	April 1, 2016 - March 31, 2018	April 1, 2017 - March 31, 2018	April 1, 2017 - March 31, 2018
Numerator MP - DY1	May 1, 2016 - April 30, 2018	May 1, 2017 - April 30, 2018	May 1, 2017 - April 30, 2018
Numerator MP - DY1	June 1, 2016 - May 31, 2018	June 1, 2017 - May 31, 2018	June 1, 2017 - May 31, 2018
Numerator MP - DY1	July 1, 2016 - June 30, 2018	July 1, 2017 - June 30, 2018	July 1, 2017 - June 30, 2018

Table 1. BHC-Reported Mea

Numerator MP - DY2	Jan. 1, 2017 - Dec. 31, 2018	Jan. 1, 2018 - Dec. 31, 2018	Jan. 1, 2018 - Dec. 31, 2018
Numerator MP - DY2	Feb. 1, 2017 - Jan. 31, 2019	Feb. 1, 2018 - Jan. 31, 2019	Feb. 1, 2018 - Jan. 31, 2019
Numerator MP - DY2	March 1, 2017 - Feb. 28, 2019	March 1, 2018 - Feb. 28, 2019	March 1, 2018 - Feb. 28, 2019
Numerator MP - DY2	April 1, 2017 - March 31, 2019	April 1, 2018 - March 31, 2019	April 1, 2018 - March 31, 2019
Numerator MP - DY2	May 1, 2017 - April 30, 2019	May 1, 2018 - April 30, 2019	May 1, 2018 - April 30, 2019
Numerator MP - DY2	June 1, 2017 - May 31, 2019	June 1, 2018 - May 31, 2019	June 1, 2018 - May 31, 2019
Numerator MP - DY2	July 1, 2017 - June 30, 2019	July 1, 2018 - June 30, 2019	July 1, 2018 - June 30, 2019

Table 1. BHC-Reported Mea

Factor and Time Period	Screening for Clinical Depression and Follow-up Plan	Depression Remission at Twelve Months
	(CDF-BH)	(DEP-REM-12)
Denominator MP - DY1	Jan. 1, 2017 - Dec. 31, 2017	Jan. 1, 2017 - Dec. 31, 2017
Denominator MP - DY1	Feb. 1, 2017 - Jan. 31, 2018	Feb. 1, 2017 - Jan. 31, 2018
Denominator MP - DY1	March 1, 2017 - Feb. 28, 2018	March 1, 2017 - Feb. 28, 2018
Denominator MP - DY1	April 1, 2017 - March 31, 2018	April 1, 2017 - March 31, 2018
Denominator MP - DY1	May 1, 2017 - April 30, 2018	May 1, 2017 - April 30, 2018
Denominator MP - DY1	June 1, 2017 - May 31, 2018	June 1, 2017 - May 31, 2018
Denominator MP - DY1	July 1, 2017 - June 30, 2018	July 1, 2017 - June 30, 2018
Denominator MP - DY2	Jan. 1, 2018 - Dec. 31, 2018	Jan. 1, 2018 - Dec. 31, 2018
Denominator MP - DY2	Feb. 1, 2018 - Jan. 31, 2019	Feb. 1, 2018 - Jan. 31, 2019
Denominator MP - DY2	March 1, 2018 - Feb. 28, 2019	March 1, 2018 - Feb. 28, 2019
Denominator MP - DY2	April 1, 2018 - March 31, 2019	April 1, 2018 - March 31, 2019
Denominator MP - DY2	May 1, 2018 - April 30, 2019	May 1, 2018 - April 30, 2019
Denominator MP - DY2	June 1, 2018 - May 31, 2019	June 1, 2018 - May 31, 2019
Denominator MP - DY2	July 1, 2018 - June 30, 2019	July 1, 2018 - June 30, 2019
Numerator MP - DY1	Jan. 1, 2017 - Dec. 31, 2017	Jan. 1, 2017 - Jan. 30, 2018
Numerator MP - DY1	Feb. 1, 2017 - Jan. 31, 2018	Feb. 1, 2017 - March 2, 2018
Numerator MP - DY1	March 1, 2017 - Feb. 28, 2018	March 1, 2017 - March 30, 2018
Numerator MP - DY1	April 1, 2017 - March 31, 2018	April 1, 2017 - April 30, 2018
Numerator MP - DY1	May 1, 2017 - April 30, 2018	May 1, 2017 - May 30, 2018
Numerator MP - DY1	June 1, 2017 - May 31, 2018	June 1, 2017 - June 30, 2018
Numerator MP - DY1	July 1, 2017 - June 30, 2018	July 1, 2017 - July 30, 2018

Table 1. BHC-Reported Mea

Numerator MP - DY2	Jan. 1, 2018 - Dec. 31, 2018	Jan. 1, 2018 - Jan. 30, 2019
Numerator MP - DY2	Feb. 1, 2018 - Jan. 31, 2019	Feb. 1, 2018 - March 2, 2019
Numerator MP - DY2	March 1, 2018 - Feb. 28, 2019	March 1, 2018 - March 30, 2019
Numerator MP - DY2	April 1, 2018 - March 31, 2019	April 1, 2018 - April 30, 2019
Numerator MP - DY2	May 1, 2018 - April 30, 2019	May 1, 2018 - May 30, 2019
Numerator MP - DY2	June 1, 2018 - May 31, 2019	June 1, 2018 - June 30, 2019
Numerator MP - DY2	July 1, 2018 - June 30, 2019	July 1, 2018 - July 30, 2019

Table 2. State-Reported Measures Measurement Periods (MPs) for CCBHCs -- Demonstration Years (DY) 1 and

Factor and Time Period	Housing Status	Suicide Attempts
	(HOU)	(SU-A)
Denominator MP - DY1	Jan. 1, 2017 - June 30, 2017 <u>and</u> July 1, 2017 - Dec. 31, 2017	Jan. 1, 2017 - Nov. 30, 2017
Denominator MP - DY1	Feb. 1, 2017 - July 31, 2017 <u>and</u> Aug. 1, 2017 - Jan. 31, 2018	Feb. 1, 2017 - Dec. 31, 2017
Denominator MP - DY1	March 1, 2017 - Aug. 31, 2017 <u>and</u> Sept. 1, 2017 - Feb. 28, 2018	March 1, 2017 - Jan. 31, 2018
Denominator MP - DY1	April 1, 2017 - Sept. 30, 2017 <u>and</u> Oct. 1, 2017 - March 31, 2018	April 1, 2017 - Feb. 28, 2018
Denominator MP - DY1	May 1, 2017 - Oct. 31, 2017 <u>and</u> Nov. 1, 2017 - April 30, 2018	May 1, 2017 - March 31, 2018
Denominator MP - DY1	June 1, 2017 - Nov. 30, 2017 <u>and</u> Dec. 1, 2017 - May 31, 2018	June 1, 2017 - April 30, 2018
Denominator MP - DY1	July 1, 2017 - Dec. 31, 2017 <u>and</u> Jan. 1, 2018 - June 30, 2018	July 1, 2017 - May 31, 2018
Denominator MP - DY2	Jan. 1, 2018 - June 30, 2018 <u>and</u> July 1, 2018 - Dec. 31, 2018	Jan. 1, 2018 - Nov. 30, 2018
Denominator MP - DY2	Feb. 1, 2018 - July 31, 2018 <u>and</u> Aug. 1, 2018 - Jan. 31, 2019	Feb. 1, 2018 - Dec. 31, 2018
Denominator MP - DY2	March 1, 2018 - Aug. 31, 2018 <u>and</u> Sept. 1, 2018 - Feb. 28, 2019	March 1, 2018 - Jan. 31, 2019
Denominator MP - DY2	April 1, 2018 - Sept. 30, 2018 <u>and</u> Oct. 1, 2018 - March 31, 2019	April 1, 2018 - Feb. 28, 2019
Denominator MP - DY2	May 1, 2018 - Oct. 31, 2018 <u>and</u> Nov. 1, 2018 - April 30, 2019	May 1, 2018 - March 31, 2019
Denominator MP - DY2	June 1, 2018 - Nov. 30, 2018 <u>and</u> Dec. 1, 2018 - May 31, 2019	June 1, 2018 - April 30, 2019
Denominator MP - DY2	July 1, 2018 - Dec. 31, 2018 <u>and</u> Jan. 1, 2019 - June 30, 2019	July 1, 2018 - May 31, 2019
Numerator MP - DY1	Jan. 1, 2017 - June 30, 2017 <u>and</u> July 1, 2017 - Dec. 31, 2017	Jan. 1, 2017 - Dec. 31, 2017
Numerator MP - DY1	Feb. 1, 2017 - July 31, 2017 <u>and</u> Aug. 1, 2017 - Jan. 31, 2018	Feb. 1, 2017 - Jan. 31, 2018
Numerator MP - DY1	March 1, 2017 - Aug. 31, 2017 <u>and</u> Sept. 1, 2017 - Feb. 28, 2018	March 1, 2017 - Feb. 28, 2018
Numerator MP - DY1	April 1, 2017 - Sept. 30, 2017 <u>and</u> Oct. 1, 2017 - March 31, 2018	April 1, 2017 - March 31, 2018
Numerator MP - DY1	May 1, 2017 - Oct. 31, 2017 <u>and</u> Nov. 1, 2017 - April 30, 2018	May 1, 2017 - April 30, 2018
Numerator MP - DY1	June 1, 2017 - Nov. 30, 2017 <u>and</u> Dec. 1, 2017 - May 31, 2018	June 1, 2017 - May 31, 2018

Table 2. State-Reported Measures Measurement Periods (MPs) for CCBHCs -- Demonstration Years (DY) 1 and

Numerator MP - DY1	July 1, 2017 – Dec. 31, 2017 <u>and</u> Jan. 1, 2018 – June 30, 2018	July 1, 2017 – June 30, 2018
Numerator MP - DY2	Jan. 1, 2018 – June 30, 2018 <u>and</u> July 1, 2018 – Dec. 31, 2018	Jan. 1, 2018 – Dec. 31, 2018
Numerator MP - DY2	Feb. 1, 2018 – July 31, 2018 <u>and</u> Aug. 1, 2018 – Jan. 31, 2019	Feb. 1, 2018 – Jan. 31, 2019
Numerator MP - DY2	March 1, 2018 – Aug. 31, 2018 <u>and</u> Sept. 1, 2018 – Feb. 28, 2019	March 1, 2018 – Feb. 28, 2019
Numerator MP - DY2	April 1, 2018 – Sept. 30, 2018 <u>and</u> Oct. 1, 2018 – March 31, 2019	April 1, 2018 – March 31, 2019
Numerator MP - DY2	May 1, 2018 – Oct. 31, 2018 <u>and</u> Nov. 1, 2018 – April 30, 2019	May 1, 2018 – April 30, 2019
Numerator MP - DY2	June 1, 2018 – Nov. 30, 2018 <u>and</u> Dec. 1, 2018 – May 31, 2019	June 1, 2018 – May 31, 2019
Numerator MP - DY2	July 1, 2018 – Dec. 31, 2018 <u>and</u> Jan. 1, 2019 – June 30, 2019	July 1, 2018 – June 30, 2019

Table 2. State-Reported Me 2

Factor and Time Period	Patient Experience of Care Survey (PEC)	Youth/Family Experience of Care Survey (Y/FEC)	Follow-up After Emergency Department Visit for Mental Illness (FUM)
Denominator MP - DY1	Jan. 1, 2017 - Dec. 31, 2017	Jan. 1, 2017 - Dec. 31, 2017	Jan. 1, 2017 - Dec. 1, 2017
Denominator MP - DY1	Feb. 1, 2017 - Jan. 31, 2018	Feb. 1, 2017 - Jan. 31, 2018	Feb. 1, 2017 - Jan. 1, 2018
Denominator MP - DY1	March 1, 2017 - Feb. 28, 2018	March 1, 2017 - Feb. 28, 2018	March 1, 2017 - Jan. 29, 2018
Denominator MP - DY1	April 1, 2017 - March 31, 2018	April 1, 2017 - March 31, 2018	April 1, 2017 - March 1, 2018
Denominator MP - DY1	May 1, 2017 - April 30, 2018	May 1, 2017 - April 30, 2018	May 1, 2017 - March 31, 2018
Denominator MP - DY1	June 1, 2017 - May 31, 2018	June 1, 2017 - May 31, 2018	June 1, 2017 - May 1, 2018
Denominator MP - DY1	July 1, 2017 - June 30, 2018	July 1, 2017 - June 30, 2018	July 1, 2017 - May 31, 2018
Denominator MP - DY2	Jan. 1, 2018 - Dec. 31, 2018	Jan. 1, 2018 - Dec. 31, 2018	Jan. 1, 2018 - Dec. 1, 2018
Denominator MP - DY2	Feb. 1, 2018 - Jan. 31, 2019	Feb. 1, 2018 - Jan. 31, 2019	Feb. 1, 2018 - Jan. 1, 2019
Denominator MP - DY2	March 1, 2018 - Feb. 28, 2019	March 1, 2018 - Feb. 28, 2019	March 1, 2018 - Jan. 29, 2019
Denominator MP - DY2	April 1, 2018 - March 31, 2019	April 1, 2018 - March 31, 2019	April 1, 2018 - March 1, 2019
Denominator MP - DY2	May 1, 2018 - April 30, 2019	May 1, 2018 - April 30, 2019	May 1, 2018 - March 31, 2019
Denominator MP - DY2	June 1, 2018 - May 31, 2019	June 1, 2018 - May 31, 2019	June 1, 2018 - May 1, 2019
Denominator MP - DY2	July 1, 2018 - June 30, 2019	July 1, 2018 - June 30, 2019	July 1, 2018 - May 31, 2019
Numerator MP - DY1	Jan. 1, 2017 - Dec. 31, 2017	Jan. 1, 2017 - Dec. 31, 2017	Jan. 1, 2017 - Dec. 31, 2017
Numerator MP - DY1	Feb. 1, 2017 - Jan. 31, 2018	Feb. 1, 2017 - Jan. 31, 2018	Feb. 1, 2017 - Jan. 31, 2018
Numerator MP - DY1	March 1, 2017 - Feb. 28, 2018	March 1, 2017 - Feb. 28, 2018	March 1, 2017 - Feb. 28, 2018
Numerator MP - DY1	April 1, 2017 - March 31, 2018	April 1, 2017 - March 31, 2018	April 1, 2017 - March 31, 2018
Numerator MP - DY1	May 1, 2017 - April 30, 2018	May 1, 2017 - April 30, 2018	May 1, 2017 - April 30, 2018
Numerator MP - DY1	June 1, 2017 - May 31, 2018	June 1, 2017 - May 31, 2018	June 1, 2017 - May 31, 2018

Table 2. State-Reported Me 2

Numerator MP - DY1	July 1, 2017 - June 30, 2018	July 1, 2017 - June 30, 2018	July 1, 2017 - June 30, 2018
Numerator MP - DY2	Jan. 1, 2018 - Dec. 31, 2018	Jan. 1, 2018 - Dec. 31, 2018	Jan. 1, 2018 - Dec. 31, 2018
Numerator MP - DY2	Feb. 1, 2018 - Jan. 31, 2019	Feb. 1, 2018 - Jan. 31, 2019	Feb. 1, 2018 - Jan. 31, 2019
Numerator MP - DY2	March 1, 2018 - Feb. 28, 2019	March 1, 2018 - Feb. 28, 2019	March 1, 2018 - Feb. 28, 2019
Numerator MP - DY2	April 1, 2018 - March 31, 2019	April 1, 2018 - March 31, 2019	April 1, 2018 - March 31, 2019
Numerator MP - DY2	May 1, 2018 - April 30, 2019	May 1, 2018 - April 30, 2019	May 1, 2018 - April 30, 2019
Numerator MP - DY2	June 1, 2018 - May 31, 2019	June 1, 2018 - May 31, 2019	June 1, 2018 - May 31, 2019
Numerator MP - DY2	July 1, 2018 - June 30, 2019	July 1, 2018 - June 30, 2019	July 1, 2018 - June 30, 2019

Table 2. State-Reported Me

Factor and Time Period	Follow-up After Emergency Department Visit for Alcohol or Other Drug Dependence (FUA)	Plan All-Cause Readmissions Rate (PCR-BH)	Diabetes Screening for People With Schizophrenia or Bipolar Disorder Who Are Using Antipsychotic Medications (SSD)
Denominator MP - DY1	Jan. 1, 2017 - Dec. 1, 2017	Jan. 1, 2017 - Dec. 1, 2017	Jan. 1, 2016 - Dec. 31, 2017
Denominator MP - DY1	Feb. 1, 2017 - Jan. 1, 2018	Feb. 1, 2017 - Jan. 1, 2018	Feb. 1, 2016 - Jan. 31, 2018
Denominator MP - DY1	March 1, 2017 - Jan. 29, 2018	March 1, 2017 - Jan. 29, 2018	March 1, 2016 - Feb. 28, 2018
Denominator MP - DY1	April 1, 2017 - March 1, 2018	April 1, 2017 - March 1, 2018	April 1, 2016 - March 31, 2018
Denominator MP - DY1	May 1, 2017 - March 31, 2018	May 1, 2017 - March 31, 2018	May 1, 2016 - April 30, 2018
Denominator MP - DY1	June 1, 2017 - May 1, 2018	June 1, 2017 - May 1, 2018	June 1, 2016 - May 31, 2018
Denominator MP - DY1	July 1, 2017 - May 31, 2018	July 1, 2017 - May 31, 2018	July 1, 2016 - June 30, 2018
Denominator MP - DY2	Jan. 1, 2018 - Dec. 1, 2018	Jan. 1, 2018 - Dec. 1, 2018	Jan. 1, 2017 - Dec. 31, 2018
Denominator MP - DY2	Feb. 1, 2018 - Jan. 1, 2019	Feb. 1, 2018 - Jan. 1, 2019	Feb. 1, 2017 - Jan. 31, 2019
Denominator MP - DY2	March 1, 2018 - Jan. 29, 2019	March 1, 2018 - Jan. 29, 2019	March 1, 2017 - Feb. 28, 2019
Denominator MP - DY2	April 1, 2018 - March 1, 2019	April 1, 2018 - March 1, 2019	April 1, 2017 - March 31, 2019
Denominator MP - DY2	May 1, 2018 - March 31, 2019	May 1, 2018 - March 31, 2019	May 1, 2017 - April 30, 2019
Denominator MP - DY2	June 1, 2018 - May 1, 2019	June 1, 2018 - May 1, 2019	June 1, 2017 - May 31, 2019
Denominator MP - DY2	July 1, 2018 - May 31, 2019	July 1, 2018 - May 31, 2019	July 1, 2017 - June 30, 2019
Numerator MP - DY1	Jan. 1, 2017 - Dec. 31, 2017	Jan. 1, 2017 - Dec. 31, 2017	Jan. 1, 2017 - Dec. 31, 2017
Numerator MP - DY1	Feb. 1, 2017 - Jan. 31, 2018	Feb. 1, 2017 - Jan. 31, 2018	Feb. 1, 2017 - Jan. 31, 2018
Numerator MP - DY1	March 1, 2017 - Feb. 28, 2018	March 1, 2017 - Feb. 28, 2018	March 1, 2017 - Feb. 28, 2018
Numerator MP - DY1	April 1, 2017 - March 31, 2018	April 1, 2017 - March 31, 2018	April 1, 2017 - March 31, 2018
Numerator MP - DY1	May 1, 2017 - April 30, 2018	May 1, 2017 - April 30, 2018	May 1, 2017 - April 30, 2018
Numerator MP - DY1	June 1, 2017 - May 31, 2018	June 1, 2017 - May 31, 2018	June 1, 2017 - May 31, 2018

Table 2. State-Reported Me

Numerator MP - DY1	July 1, 2017 - June 30, 2018	July 1, 2017 - June 30, 2018	July 1, 2017 - June 30, 2018
Numerator MP - DY2	Jan. 1, 2018 - Dec. 31, 2018	Jan. 1, 2018 - Dec. 31, 2018	Jan. 1, 2018 - Dec. 31, 2018
Numerator MP - DY2	Feb. 1, 2018 - Jan. 31, 2019	Feb. 1, 2018 - Jan. 31, 2019	Feb. 1, 2018 - Jan. 31, 2019
Numerator MP - DY2	March 1, 2018 - Feb. 28, 2019	March 1, 2018 - Feb. 28, 2019	March 1, 2018 - Feb. 28, 2019
Numerator MP - DY2	April 1, 2018 - March 31, 2019	April 1, 2018 - March 31, 2019	April 1, 2018 - March 31, 2019
Numerator MP - DY2	May 1, 2018 - April 30, 2019	May 1, 2018 - April 30, 2019	May 1, 2018 - April 30, 2019
Numerator MP - DY2	June 1, 2018 - May 31, 2019	June 1, 2018 - May 31, 2019	June 1, 2018 - May 31, 2019
Numerator MP - DY2	July 1, 2018 - June 30, 2019	July 1, 2018 - June 30, 2019	July 1, 2018 - June 30, 2019

Table 2. State-Reported Me

Factor and Time Period	Diabetes Care For People With Serious Mental Illness: Hemoglobin A1c (Hba1c) Poor Control (>9.0%) (SMI-PC)	Metabolic Monitoring for Children and Adolescents on Antipsychotics (APM)	Cardiovascular Monitoring for People With Cardiovascular Disease and Schizophrenia (SMC)
Denominator MP - DY1	Jan. 1, 2016 - Dec. 31, 2017	Jan. 1, 2017 - Dec. 31, 2017	Jan. 1, 2016 - Dec. 31, 2017
Denominator MP - DY1	Feb. 1, 2016 - Jan. 31, 2018	Feb. 1, 2017 - Jan. 31, 2018	Feb. 1, 2016 - Jan. 31, 2018
Denominator MP - DY1	March 1, 2016 - Feb. 28, 2018	March 1, 2017 - Feb. 28, 2018	March 1, 2016 - Feb. 28, 2018
Denominator MP - DY1	April 1, 2016 - March 31, 2018	April 1, 2017 - March 31, 2018	April 1, 2016 - March 31, 2018
Denominator MP - DY1	May 1, 2016 - April 30, 2018	May 1, 2017 - April 30, 2018	May 1, 2016 - April 30, 2018
Denominator MP - DY1	June 1, 2016 - May 31, 2018	June 1, 2017 - May 31, 2018	June 1, 2016 - May 31, 2018
Denominator MP - DY1	July 1, 2016 - June 30, 2018	July 1, 2017 - June 30, 2018	July 1, 2016 - June 30, 2018
Denominator MP - DY2	Jan. 1, 2017 - Dec. 31, 2018	Jan. 1, 2018 - Dec. 31, 2018	Jan. 1, 2017 - Dec. 31, 2018
Denominator MP - DY2	Feb. 1, 2017 - Jan. 31, 2019	Feb. 1, 2018 - Jan. 31, 2019	Feb. 1, 2017 - Jan. 31, 2019
Denominator MP - DY2	March 1, 2017 - Feb. 28, 2019	March 1, 2018 - Feb. 28, 2019	March 1, 2017 - Feb. 28, 2019
Denominator MP - DY2	April 1, 2017 - March 31, 2019	April 1, 2018 - March 31, 2019	April 1, 2017 - March 31, 2019
Denominator MP - DY2	May 1, 2017 - April 30, 2019	May 1, 2018 - April 30, 2019	May 1, 2017 - April 30, 2019
Denominator MP - DY2	June 1, 2017 - May 31, 2019	June 1, 2018 - May 31, 2019	June 1, 2017 - May 31, 2019
Denominator MP - DY2	July 1, 2017 - June 30, 2019	July 1, 2018 - June 30, 2019	July 1, 2017 - June 30, 2019
Numerator MP - DY1	Jan. 1, 2017 - Dec. 31, 2017	Jan. 1, 2017 - Dec. 31, 2017	Jan. 1, 2017 - Dec. 31, 2017
Numerator MP - DY1	Feb. 1, 2017 - Jan. 31, 2018	Feb. 1, 2017 - Jan. 31, 2018	Feb. 1, 2017 - Jan. 31, 2018
Numerator MP - DY1	March 1, 2017 - Feb. 28, 2018	March 1, 2017 - Feb. 28, 2018	March 1, 2017 - Feb. 28, 2018
Numerator MP - DY1	April 1, 2017 - March 31, 2018	April 1, 2017 - March 31, 2018	April 1, 2017 - March 31, 2018
Numerator MP - DY1	May 1, 2017 - April 30, 2018	May 1, 2017 - April 30, 2018	May 1, 2017 - April 30, 2018
Numerator MP - DY1	June 1, 2017 - May 31, 2018	June 1, 2017 - May 31, 2018	June 1, 2017 - May 31, 2018

Table 2. State-Reported Me

Numerator MP - DY1	July 1, 2017 - June 30, 2018	July 1, 2017 - June 30, 2018	July 1, 2017 - June 30, 2018
Numerator MP - DY2	Jan. 1, 2018 - Dec. 31, 2018	Jan. 1, 2018 - Dec. 31, 2018	Jan. 1, 2018 - Dec. 31, 2018
Numerator MP - DY2	Feb. 1, 2018 - Jan. 31, 2019	Feb. 1, 2018 - Jan. 31, 2019	Feb. 1, 2018 - Jan. 31, 2019
Numerator MP - DY2	March 1, 2018 - Feb. 28, 2019	March 1, 2018 - Feb. 28, 2019	March 1, 2018 - Feb. 28, 2019
Numerator MP - DY2	April 1, 2018 - March 31, 2019	April 1, 2018 - March 31, 2019	April 1, 2018 - March 31, 2019
Numerator MP - DY2	May 1, 2018 - April 30, 2019	May 1, 2018 - April 30, 2019	May 1, 2018 - April 30, 2019
Numerator MP - DY2	June 1, 2018 - May 31, 2019	June 1, 2018 - May 31, 2019	June 1, 2018 - May 31, 2019
Numerator MP - DY2	July 1, 2018 - June 30, 2019	July 1, 2018 - June 30, 2019	July 1, 2018 - June 30, 2019

Table 2. State-Reported Me

Factor and Time Period	Adherence to Mood Stabilizers for Individuals with Bipolar I Disorder (AMS-BD)	Adherence to Antipsychotic Medications for Individuals With Schizophrenia (SAA-BH)
Denominator MP - DY1	Jan. 1, 2017 - Dec. 31, 2017	Jan. 1, 2017 - Dec. 31, 2017
Denominator MP - DY1	Feb. 1, 2017 - Jan. 31, 2018	Feb. 1, 2017 - Jan. 31, 2018
Denominator MP - DY1	March 1, 2017 - Feb. 28, 2018	March 1, 2017 - Feb. 28, 2018
Denominator MP - DY1	April 1, 2017 - March 31, 2018	April 1, 2017 - March 31, 2018
Denominator MP - DY1	May 1, 2017 - April 30, 2018	May 1, 2017 - April 30, 2018
Denominator MP - DY1	June 1, 2017 - May 31, 2018	June 1, 2017 - May 31, 2018
Denominator MP - DY1	July 1, 2017 - June 30, 2018	July 1, 2017 - June 30, 2018
Denominator MP - DY2	Jan. 1, 2018 - Dec. 31, 2018	Jan. 1, 2018 - Dec. 31, 2018
Denominator MP - DY2	Feb. 1, 2018 - Jan. 31, 2019	Feb. 1, 2018 - Jan. 31, 2019
Denominator MP - DY2	March 1, 2018 - Feb. 28, 2019	March 1, 2018 - Feb. 28, 2019
Denominator MP - DY2	April 1, 2018 - March 31, 2019	April 1, 2018 - March 31, 2019
Denominator MP - DY2	May 1, 2018 - April 30, 2019	May 1, 2018 - April 30, 2019
Denominator MP - DY2	June 1, 2018 - May 31, 2019	June 1, 2018 - May 31, 2019
Denominator MP - DY2	July 1, 2018 - June 30, 2019	July 1, 2018 - June 30, 2019
Numerator MP - DY1	Jan. 1, 2017 - Dec. 31, 2017	Jan. 1, 2017 - Dec. 31, 2017
Numerator MP - DY1	Feb. 1, 2017 - Jan. 31, 2018	Feb. 1, 2017 - Jan. 31, 2018
Numerator MP - DY1	March 1, 2017 - Feb. 28, 2018	March 1, 2017 - Feb. 28, 2018
Numerator MP - DY1	April 1, 2017 - March 31, 2018	April 1, 2017 - March 31, 2018
Numerator MP - DY1	May 1, 2017 - April 30, 2018	May 1, 2017 - April 30, 2018
Numerator MP - DY1	June 1, 2017 - May 31, 2018	June 1, 2017 - May 31, 2018

Table 2. State-Reported Me

Numerator MP - DY1	July 1, 2017 - June 30, 2018	July 1, 2017 - June 30, 2018
Numerator MP - DY2	Jan. 1, 2018 - Dec. 31, 2018	Jan. 1, 2018 - Dec. 31, 2018
Numerator MP - DY2	Feb. 1, 2018 - Jan. 31, 2019	Feb. 1, 2018 - Jan. 31, 2019
Numerator MP - DY2	March 1, 2018 - Feb. 28, 2019	March 1, 2018 - Feb. 28, 2019
Numerator MP - DY2	April 1, 2018 - March 31, 2019	April 1, 2018 - March 31, 2019
Numerator MP - DY2	May 1, 2018 - April 30, 2019	May 1, 2018 - April 30, 2019
Numerator MP - DY2	June 1, 2018 - May 31, 2019	June 1, 2018 - May 31, 2019
Numerator MP - DY2	July 1, 2018 - June 30, 2019	July 1, 2018 - June 30, 2019

Table 2. State-Reported Me

Factor and Time Period	<p align="center">Adult Follow-up After Hospitalization for Mental Illness</p> <p align="center">(FUH-BH-A)</p>
Denominator MP - DY1	Jan. 1, 2017 - Dec. 1, 2017
Denominator MP - DY1	Feb. 1, 2017 - Jan. 1, 2018
Denominator MP - DY1	March 1, 2017 - Jan. 29, 2018
Denominator MP - DY1	April 1, 2017 - March 1, 2018
Denominator MP - DY1	May 1, 2017 - March 31, 2018
Denominator MP - DY1	June 1, 2017 - May 1, 2018
Denominator MP - DY1	July 1, 2017 - May 31, 2018
Denominator MP - DY2	Jan. 1, 2018 - Dec. 1, 2018
Denominator MP - DY2	Feb. 1, 2018 - Jan. 1, 2019
Denominator MP - DY2	March 1, 2018 - Jan. 29, 2019
Denominator MP - DY2	April 1, 2018 - March 1, 2019
Denominator MP - DY2	May 1, 2018 - March 31, 2019
Denominator MP - DY2	June 1, 2018 - May 1, 2019
Denominator MP - DY2	July 1, 2018 - May 31, 2019
Numerator MP - DY1	Jan. 1, 2017 - Dec. 8, 2017 <u>and</u> Jan. 1, 2017 - Dec. 31, 2017
Numerator MP - DY1	Feb. 1, 2017 - Jan. 8, 2018 <u>and</u> Feb. 1, 2017 - Jan. 31, 2018
Numerator MP - DY1	March 1, 2017 - Feb. 5, 2018 <u>and</u> March 1, 2017 - Feb. 28, 2018
Numerator MP - DY1	April 1, 2017 - March 8, 2018 <u>and</u> April 1, 2017 - March 31, 2018
Numerator MP - DY1	May 1, 2017 - April 7, 2018 <u>and</u> May 1, 2017 - April 30, 2018
Numerator MP - DY1	June 1, 2017 - May 8, 2018 <u>and</u> June 1, 2017 - May 31, 2018

Table 2. State-Reported Me

Numerator MP - DY1	July 1, 2017 - June 7, 2018 <u>and</u> July 1, 2017 - June 30, 2018
Numerator MP - DY2	Jan. 1, 2018 - Dec. 8, 2018 <u>and</u> Jan. 1, 2018 - Dec. 31, 2018
Numerator MP - DY2	Feb. 1, 2018 - Jan. 8, 2019 <u>and</u> Feb. 1, 2018 - Jan. 31, 2019
Numerator MP - DY2	March 1, 2018 - Feb. 5, 2019 <u>and</u> March 1, 2018 - Feb. 28, 2019
Numerator MP - DY2	April 1, 2018 - March 8, 2019 <u>and</u> April 1, 2018 - March 31, 2019
Numerator MP - DY2	May 1, 2018 - April 7, 2019 <u>and</u> May 1, 2018 - April 30, 2019
Numerator MP - DY2	June 1, 2018 - May 8, 2019 <u>and</u> June 1, 2018 - May 31, 2019
Numerator MP - DY2	July 1, 2018 - June 7, 2019 <u>and</u> July 1, 2018 - June 30, 2019

Table 2. State-Reported Me

Factor and Time Period	<p style="text-align: center;">Child Follow-Up After Hospitalization For Mental Illness</p> <p style="text-align: center;">(FUH-BH-C)</p>
Denominator MP - DY1	Jan. 1, 2017 - Dec. 1, 2017
Denominator MP - DY1	Feb. 1, 2017 - Jan. 1, 2018
Denominator MP - DY1	March 1, 2017 - Jan. 29, 2018
Denominator MP - DY1	April 1, 2017 - March 1, 2018
Denominator MP - DY1	May 1, 2017 - March 31, 2018
Denominator MP - DY1	June 1, 2017 - May 1, 2018
Denominator MP - DY1	July 1, 2017 - May 31, 2018
Denominator MP - DY2	Jan. 1, 2018 - Dec. 1, 2018
Denominator MP - DY2	Feb. 1, 2018 - Jan. 1, 2019
Denominator MP - DY2	March 1, 2018 - Jan. 29, 2019
Denominator MP - DY2	April 1, 2018 - March 1, 2019
Denominator MP - DY2	May 1, 2018 - March 31, 2019
Denominator MP - DY2	June 1, 2018 - May 1, 2019
Denominator MP - DY2	July 1, 2018 - May 31, 2019
Numerator MP - DY1	Jan. 1, 2017 - Dec. 8, 2017 <u>and</u> Jan. 1, 2017 - Dec. 31, 2017
Numerator MP - DY1	Feb. 1, 2017 - Jan. 8, 2018 <u>and</u> Feb. 1, 2017 - Jan. 31, 2018
Numerator MP - DY1	March 1, 2017 - Feb. 5, 2018 <u>and</u> March 1, 2017 - Feb. 28, 2018
Numerator MP - DY1	April 1, 2017 - March 8, 2018 <u>and</u> April 1, 2017 - March 31, 2018
Numerator MP - DY1	May 1, 2017 - April 7, 2018 <u>and</u> May 1, 2017 - April 30, 2018
Numerator MP - DY1	June 1, 2017 - May 8, 2018 <u>and</u> June 1, 2017 - May 31, 2018

Table 2. State-Reported Me

Numerator MP - DY1	July 1, 2017 - June 7, 2018 <u>and</u> July 1, 2017 - June 30, 2018
Numerator MP - DY2	Jan. 1, 2018 - Dec. 8, 2018 <u>and</u> Jan. 1, 2018 - Dec. 31, 2018
Numerator MP - DY2	Feb. 1, 2018 - Jan. 8, 2019 <u>and</u> Feb. 1, 2018 - Jan. 31, 2019
Numerator MP - DY2	March 1, 2018 - Feb. 5, 2019 <u>and</u> March 1, 2018 - Feb. 28, 2019
Numerator MP - DY2	April 1, 2018 - March 8, 2019 <u>and</u> April 1, 2018 - March 31, 2019
Numerator MP - DY2	May 1, 2018 - April 7, 2019 <u>and</u> May 1, 2018 - April 30, 2019
Numerator MP - DY2	June 1, 2018 - May 8, 2019 <u>and</u> June 1, 2018 - May 31, 2019
Numerator MP - DY2	July 1, 2018 - June 7, 2019 <u>and</u> July 1, 2018 - June 30, 2019

Table 2. State-Reported Me

Factor and Time Period	<p align="center">Follow-up Care for Children Prescribed Attention-Deficit Hyperactivity Disorder (ADHD) Medication</p> <p align="center">(ADD-BH)</p>
Denominator MP - DY1	March 1, 2016 – Feb. 28, 2017 <u>and</u> Nov. 2, 2015 – Oct. 31, 2016
Denominator MP - DY1	April 1, 2016 – March 31, 2017 <u>and</u> Dec. 3, 2015 – Dec. 1, 2016
Denominator MP - DY1	May 1, 2016 – April 30, 2017 <u>and</u> Jan. 2, 2016 – Dec. 31, 2016
Denominator MP - DY1	June 1, 2016 – May 31, 2017 <u>and</u> Feb. 2, 2016 – Jan. 31, 2017
Denominator MP - DY1	July 1, 2016 – June 30, 2017 <u>and</u> March 3, 2016 – March 2, 2017
Denominator MP - DY1	Aug. 1, 2016 – July 31, 2017 <u>and</u> April 3, 2016 – April 2, 2017
Denominator MP - DY1	Sept. 1, 2016 – Aug. 31, 2017 <u>and</u> May 4, 2016 – May 3, 2017
Denominator MP - DY2	March 1, 2017 – Feb. 28, 2018 <u>and</u> Nov. 1, 2016 – Oct. 31, 2017
Denominator MP - DY2	April 1, 2017 – March 31, 2018 <u>and</u> Dec. 2, 2016 – Dec. 1, 2017
Denominator MP - DY2	May 1, 2017 – April 30, 2018 <u>and</u> Jan. 1, 2017 – Dec. 31, 2017
Denominator MP - DY2	June 1, 2017 – May 31, 2018 <u>and</u> Feb. 1, 2017 – Jan. 31, 2018
Denominator MP - DY2	July 1, 2017 – June 30, 2018 <u>and</u> March 3, 2017 – March 2, 2018
Denominator MP - DY2	Aug. 1, 2017 – July 31, 2018 <u>and</u> April 3, 2017 – April 2, 2018
Denominator MP - DY2	Sept. 1, 2017 – Aug. 31, 2018 <u>and</u> May 4, 2017 – May 3, 2018
Numerator MP - DY1	March 31, 2016 – March 30, 2017 <u>and</u> Dec. 26, 2016 – Dec. 25, 2017
Numerator MP - DY1	May 1, 2016 – April 30, 2017 <u>and</u> Jan. 26, 2017 – Jan. 25, 2018
Numerator MP - DY1	May 31, 2016 – May 30, 2017 <u>and</u> Feb. 25, 2017 – Feb. 24, 2018
Numerator MP - DY1	July 1, 2016 – June 30, 2017 <u>and</u> March 28, 2017 – March 27, 2018
Numerator MP - DY1	July 31, 2016 – July 30, 2017 <u>and</u> April 27, 2017 – April 26, 2018
Numerator MP - DY1	Aug. 31, 2016 – Aug. 30, 2017 <u>and</u> May 28, 2017 – May 27, 2018

Table 2. State-Reported Me

Numerator MP - DY1	Oct. 1, 2016 – Sept. 30, 2017 <u>and</u> June 28, 2017 – June 27, 2018
Numerator MP - DY2	March 31, 2017 – March 30, 2018 <u>and</u> Dec. 26, 2017 – Dec. 25, 2018
Numerator MP - DY2	May 1, 2017 – April 30, 2018 <u>and</u> Jan. 26, 2018 – Jan. 25, 2019
Numerator MP - DY2	May 31, 2017 – May 30, 2018 <u>and</u> Feb. 25, 2018 – Feb. 24, 2019
Numerator MP - DY2	July 1, 2017 – June 30, 2018 <u>and</u> March 28, 2018 – March 27, 2019
Numerator MP - DY2	July 31, 2017 – July 30, 2018 <u>and</u> April 27, 2018 – April 26, 2019
Numerator MP - DY2	Aug. 31, 2017 – Aug. 30, 2018 <u>and</u> May 28, 2018 – May 27, 2019
Numerator MP - DY2	Oct. 1, 2017 – Sept. 30, 2018 <u>and</u> June 28, 2018 – June 27, 2019

Table 2. State-Reported Me

Factor and Time Period	<p style="text-align: center;">Antidepressant Medication Management</p> <p style="text-align: center;">(AMM-BH)</p>
Denominator MP - DY1	June 1, 2016 - April 30, 2017 <u>and</u> Feb. 17, 2016 - Jan. 15, 2017
Denominator MP - DY1	July 1, 2016 - May 31, 2017 <u>and</u> March 18, 2016 - Feb. 15, 2017
Denominator MP - DY1	Aug. 1, 2016 - June 30, 2017 <u>and</u> April 18, 2016 - March 17, 2017
Denominator MP - DY1	Sept. 1, 2016 - July 31, 2017 <u>and</u> May 19, 2016 - April 17, 2017
Denominator MP - DY1	Oct. 1, 2016 - Aug. 31, 2017 <u>and</u> June 18, 2016 - May 18, 2017
Denominator MP - DY1	Nov. 1, 2016 - Sep. 30, 2017 <u>and</u> July 19, 2016 - June 17, 2017
Denominator MP - DY1	Dec. 1, 2016 - Oct. 31, 2017 <u>and</u> Aug. 18, 2016 - July 18, 2017
Denominator MP - DY2	June 1, 2017 - April 30, 2018 <u>and</u> Feb. 16, 2017 - Jan. 15, 2018
Denominator MP - DY2	July 1, 2017 - May 31, 2018 <u>and</u> March 18, 2017 - Feb. 15, 2018
Denominator MP - DY2	Aug. 1, 2017 - June 30, 2018 <u>and</u> April 18, 2017 - March 17, 2018
Denominator MP - DY2	Sept. 1, 2017 - July 31, 2018 <u>and</u> May 19, 2017 - April 17, 2018
Denominator MP - DY2	Oct. 1, 2017 - Aug. 31, 2018 <u>and</u> June 18, 2017 - May 18, 2018
Denominator MP - DY2	Nov. 1, 2017 - Sep. 30, 2018 <u>and</u> July 19, 2017 - June 17, 2018
Denominator MP - DY2	Dec. 1, 2017 - Oct. 31, 2018 <u>and</u> Aug. 18, 2017 - July 18, 2018
Numerator MP - DY1	Sept. 23, 2016 - Aug. 22, 2017 <u>and</u> Jan. 18, 2017 - Dec. 17, 2017
Numerator MP - DY1	Oct. 23, 2016 - Sept. 22, 2017 <u>and</u> Feb. 17, 2017 - Jan. 17, 2018
Numerator MP - DY1	Nov. 23, 2016 - Oct. 22, 2017 <u>and</u> March 20, 2017 - Feb. 16, 2018
Numerator MP - DY1	Dec. 24, 2016 - Nov. 22, 2017 <u>and</u> April 20, 2017 - March 19, 2018
Numerator MP - DY1	Jan. 23, 2017 - Dec. 23, 2017 <u>and</u> May 20, 2017 - April 19, 2018
Numerator MP - DY1	Feb. 23, 2017 - Jan. 22, 2018 <u>and</u> June 20, 2017 - May 19, 2018

Table 2. State-Reported Me

Numerator MP - DY1	March 25, 2017 - Feb. 22, 2018 <u>and</u> July 20, 2017 - June 19, 2018
Numerator MP - DY2	Sept. 23, 2017 - Aug. 22, 2018 <u>and</u> Jan. 18, 2018 - Dec. 17, 2018
Numerator MP - DY2	Oct. 23, 2017 - Sept. 22, 2018 <u>and</u> Feb. 17, 2018 - Jan. 17, 2019
Numerator MP - DY2	Nov. 23, 2017 - Sept. 22, 2018 <u>and</u> March 20, 2018 - Feb. 16, 2019
Numerator MP - DY2	Dec. 24, 2017 - Nov. 22, 2018 <u>and</u> April 20, 2018 - March 19, 2019
Numerator MP - DY2	Jan. 23, 2018 - Dec. 23, 2018 <u>and</u> May 20, 2018 - April 19, 2019
Numerator MP - DY2	Feb. 23, 2018 - Jan. 22, 2019 <u>and</u> June 20, 2018 - May 19, 2019
Numerator MP - DY2	March 25, 2018 - Feb. 22, 2019 <u>and</u> July 20, 2018 - June 19, 2019

Table 2. State-Reported Me

Factor and Time Period	<p style="text-align: center;">Initiation and Engagement of Alcohol and Other Drug Dependence Treatment</p> <p style="text-align: center;">(IET-BH)</p>
Denominator MP - DY1	Jan. 1, 2017 - Nov. 15, 2017 <u>and</u> Nov. 2, 2016 - Sept. 16, 2017
Denominator MP - DY1	Feb. 1, 2017 - Dec. 15, 2017 <u>and</u> Dec. 3, 2016 - Oct. 16, 2017
Denominator MP - DY1	March 1, 2017 - Jan. 15, 2018 <u>and</u> Dec. 31, 2016 - Nov. 16, 2017
Denominator MP - DY1	April 1, 2017 - Feb. 15, 2018 <u>and</u> Jan. 31, 2017 - Dec. 17, 2017
Denominator MP - DY1	May 1, 2017 - March 15, 2018 <u>and</u> March 2, 2017 - Jan. 14, 2018
Denominator MP - DY1	June 1, 2017 - April 15, 2018 <u>and</u> April 2, 2017 - Feb. 14, 2018
Denominator MP - DY1	July 1, 2017 - May 15, 2018 <u>and</u> May 2, 2017 - March 16, 2018
Denominator MP - DY2	Jan. 1, 2018 - Nov. 15, 2018 <u>and</u> Nov. 2, 2017 - Sept. 16, 2018
Denominator MP - DY2	Feb. 1, 2018 - Dec. 15, 2018 <u>and</u> Dec. 3, 2017 - Oct. 16, 2018
Denominator MP - DY2	March 1, 2018 - Jan. 15, 2019 <u>and</u> Dec. 31, 2017 - Nov. 16, 2018
Denominator MP - DY2	April 1, 2018 - Feb. 15, 2019 <u>and</u> Jan. 31, 2018 - Dec. 17, 2018
Denominator MP - DY2	May 1, 2018 - March 15, 2019 <u>and</u> March 2, 2018 - Jan. 14, 2019
Denominator MP - DY2	June 1, 2018 - April 15, 2019 <u>and</u> April 2, 2018 - Feb. 14, 2019
Denominator MP - DY2	July 1, 2018 - May 15, 2019 <u>and</u> May 2, 2018 - March 16, 2019
Numerator MP - DY1	Jan. 1, 2017 - Nov. 28, 2017 <u>and</u> Jan. 2, 2017 - Dec. 27, 2017
Numerator MP - DY1	Feb. 1, 2017 - Dec. 28, 2017 <u>and</u> Feb. 2, 2017 - Jan. 26, 2018
Numerator MP - DY1	March 1, 2017 - Jan. 28, 2018 <u>and</u> March 2, 2017 - Feb. 26, 2018
Numerator MP - DY1	April 1, 2017 - Feb. 28, 2018 <u>and</u> April 2, 2017 - March 29, 2018
Numerator MP - DY1	May 1, 2017 - March 28, 2018 <u>and</u> May 2, 2017 - April 26, 2018
Numerator MP - DY1	June 1, 2017 - April 28, 2018 <u>and</u> June 2, 2017 - May 27, 2018

Table 2. State-Reported Me

Numerator MP - DY1	July 1, 2017 – May 28, 2018 <u>and</u> July 2, 2017 – June 26, 2018
Numerator MP - DY2	Jan. 1, 2018 – Nov. 28, 2018 <u>and</u> Jan. 2, 2018 – Dec. 27, 2018
Numerator MP - DY2	Feb. 1, 2018 – Dec. 28, 2018 <u>and</u> Feb. 2, 2018 – Jan. 26, 2019
Numerator MP - DY2	March 1, 2018 – Jan. 28, 2019 <u>and</u> March 2, 2018 – Feb. 26, 2019
Numerator MP - DY2	April 1, 2018 – Feb. 28, 2019 <u>and</u> April 2, 2018 – March 29, 2019
Numerator MP - DY2	May 1, 2018 – March 28, 2019 <u>and</u> May 2, 2018 – April 26, 2019
Numerator MP - DY2	June 1, 2018 – April 28, 2019 <u>and</u> June 2, 2018 – May 27, 2019
Numerator MP - DY2	July 1, 2018 – May 28, 2019 <u>and</u> July 2, 2018 – June 26, 2019