



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

**Medicaid and CHIP Program (MACPro)**  
**AQM, CQM & MIH - Additional Notes PRA**  
**document**

---

**Version 1.0**  
**08/24/2017**

**Document Number:** 245-QSSI-MACPro-PRA-AdditionalNotes-D

**Contract Number:** HHSM-500-2007-00024I: HHSM-500-T0014

## Table of Contents

<b>1. Additional Notes – Screenshots .....</b>	<b>1</b>
1.1 Additional Notes .....	1
<b>Appendix A: Acronyms .....</b>	<b>2</b>

## List of Figures

Figure 1: Additional Notes .....	1
----------------------------------	---

## List of Tables

Table 1: Acronyms .....	2
-------------------------	---

# 1. Additional Notes – Screenshots

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

## 1.1 Additional Notes

**Additional Notes/Comments on Measure (Optional)**

+/-

Additional Notes/Comments on Measure (Optional)

Character count: 0/4000

**Figure 1: Additional Notes**

## Appendix A: Acronyms

Table 1: Acronyms

Acronym	Literal Translation
<b>AQM</b>	Adult Quality Measure
<b>CQM</b>	Child Quality Measures
<b>MIH</b>	Maternal and Infant Health Quality Measure
<b>PRA</b>	Paper Reduction Act of 1995



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

**Medicaid and CHIP Program (MACPro)**  
**AQM & MIH - Definition of Population PRA**  
**document**

---

**Version 1.0**  
**08/24/2017**

**Document Number:** 246-QSSI-MACPro-PRA-AQM-MIH-DefOfPopulation-D

**Contract Number:** HHSM-500-2007-00024I: HHSM-500-T0014

## Table of Contents

- 1. Definition of Population – Screenshots ..... 1**
  - 1.1 Definition of Population – Path 1 – Data Source – Hybrid or Other ..... 1
  - 1.2 Definition of Population – Path 2 – Data Source - Administrative..... 2
  - 1.3 Definition of Population – Delivery Systems..... 2
- Appendix A: Acronyms ..... 4**

## List of Figures

- Figure 1: Definition of Population – Hybrid or Other ..... 1
- Figure 2: Definition of Population – Administrative ..... 2
- Figure 3: Delivery Systems - 1 ..... 2
- Figure 4: Delivery Systems - 2 ..... 3

## List of Tables

- Table 1: Acronyms ..... 4

# 1. Definition of Population – Screenshots

*Note: This section is applicable to all core measures except the following: “Consumer Assessment of Healthcare Providers and Systems (CAHPS®) Health Plan Survey, Version 5.0H, Adult Version (Medicaid) (CPA)”.*

## 1.1 Definition of Population – Path 1 – Data Source – Hybrid or Other

*Note: This path does not apply to MIH.*

**Definition of Population Included in the Measure** +/-

**Definition of Denominator**  
Select all that apply (Must select at least one)

Denominator includes Medicaid population

Denominator includes CHIP population (e.g. pregnant women.)

Denominator includes Medicare and Medicaid Dually-Eligible population

Other

**Specify \***

**Does this denominator represent your total measure eligible population as defined by the Technical Specifications for this measure? \***

Yes

No

**what is the sample size? \***

**what is the measure-eligible population? \***

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

**Figure 1: Definition of Population – Hybrid or Other**

## 1.2 Definition of Population – Path 2 – Data Source - Administrative

**Definition of Population Included in the Measure** +/-

**Definition of Denominator**  
*Select all that apply (Must select at least one)*

Denominator includes Medicaid population

Denominator includes CHIP population (e.g. pregnant women.)

Denominator includes Medicare and Medicaid Dually-Eligible population

Other

**Specify \***

**Does this denominator represent your total measure eligible population as defined by the Technical Specifications for this measure? \***

Yes

No

**Explain which populations are excluded and why \***

**Specify Total Measure Eligible Population \***

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

Figure 2: Definition of Population – Administrative

## 1.3 Definition of Population – Delivery Systems

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

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

Fee-for-Service

**Percentage of total state FFS population represented \***

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

Primary Care Case Management (PCCM)

**Percentage of total state PCCM population represented \***

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

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

**Number of Health Plans \***

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

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

Figure 3: Delivery Systems - 1



Integrated Care Models (ICM)

Other

**Percentage of total state ICM population represented \***

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

**Describe \***

**Percentage of total other population represented \***

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

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

**Figure 4: Delivery Systems - 2**

## Appendix A: Acronyms

Table 1: Acronyms

Acronym	Literal Translation
<b>AQM</b>	Adult Quality Measure
<b>MIH</b>	Maternal and Infant Health Quality Measure
<b>PRA</b>	Paper Reduction Act of 1995



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

**Medicaid and CHIP Program (MACPro)**  
**AQM, CQM & MIH - Combined Rates PRA**  
**document**

---

**Version 1.0**  
**08/24/2017**

**Document Number:** 247-QSSI-MACPro-PRA-CombinedRates-D

**Contract Number:** HHSM-500-2007-00024I: HHSM-500-T0014

## Table of Contents

<b>1. Combined Rates – Screenshots .....</b>	<b>1</b>
1.1 Combined Rates .....	1
<b>Appendix A: Acronyms .....</b>	<b>2</b>

## List of Figures

Figure 1: Combined Rates .....	1
--------------------------------	---

## List of Tables

Table 1: Acronyms .....	2
-------------------------	---

# 1. Combined Rates – Screenshots

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

## 1.1 Combined Rates

**Combined Rate(s) from Multiple Reporting Units** +/-

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

Yes  
 No

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

**Must select one**

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

The rates are weighted based on another weighting factor

**Describe the other weighting factor:**

The rates are not weighted

**Figure 1: Combined Rates**

## Appendix A: Acronyms

Table 1: Acronyms

Acronym	Literal Translation
<b>AQM</b>	Adult Quality Measure
<b>CQM</b>	Child Quality Measures
<b>MIH</b>	Maternal and Infant Health Quality Measure
<b>PRA</b>	Paper Reduction Act of 1995



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

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

---

**Version 1.0**  
**08/24/2017**

**Document Number:** 248-QSSI-MACPro-PRA-CQM\_DefOfPopulation-D

**Contract Number:** HHSM-500-2007-00024I: HHSM-500-T0014

## Table of Contents

<b>1. Definition of Population – Screenshots .....</b>	<b>1</b>
1.1 Definition of Population .....	1
<b>Appendix A: Acronyms .....</b>	<b>3</b>

## List of Figures

Figure 1: Definition of Population - 1 .....	1
Figure 2: Definition of Population – 2 .....	2
Figure 3: Definition of Population – 3 .....	2

## List of Tables

Table 1: Acronyms .....	3
-------------------------	---



# 1. Definition of Population – Screenshots

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

## 1.1 Definition of Population

**Definition of Population Included in the Measure** +/-

**Definition of Denominator \***

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

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

Does this denominator represent your total eligible population as defined by the Technical Specifications for this measure? \*

Yes

No

Explain which populations are excluded and why \*

Specify Total Measure Eligible Population \*

Which delivery systems are represented in the Denominator?

**Figure 1: Definition of Population - 1**

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

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

Fee-for-Service

**Percentage of total state FFS population represented \***

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

Primary Care Case Management (PCCM)

**Percentage of total state PCCM population represented \***

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

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

**Number of Health Plans \***

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

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

**Figure 2: Definition of Population – 2**

Integrated Care Models (ICM)

**Percentage of total state ICM population represented \***

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

Other

**Describe**

**Percentage of total other population represented \***

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

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

**Figure 3: Definition of Population – 3**

## Appendix A: Acronyms

Table 1: Acronyms

Acronym	Literal Translation
<b>CQM</b>	Child Quality Measures
<b>PRA</b>	Paper Reduction Act of 1995



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

**Medicaid and CHIP Program (MACPro)**  
**AQM, CQM & MIH - Date Range PRA document**

---

**Version 1.0**  
**08/24/2017**

**Document Number:** 249-QSSI-MACPro-PRA-DateRange-D

**Contract Number:** HHSM-500-2007-00024I: HHSM-500-T0014

## Table of Contents

<b>1. Date Range – Screenshots</b> .....	<b>1</b>
1.1 Date Range .....	1
<b>Appendix A: Acronyms</b> .....	<b>2</b>

## List of Figures

Figure 1: Date Range .....	1
----------------------------	---

## List of Tables

Table 1: Acronyms .....	2
-------------------------	---

# 1. Date Range – Screenshots

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

## 1.1 Date Range

**Date Range** +/-

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

**Start Date**

Month

Year

**End Date**

Month

Year

**Figure 1: Date Range**

## Appendix A: Acronyms

Table 1: Acronyms

Acronym	Literal Translation
<b>AQM</b>	Adult Quality Measure
<b>CQM</b>	Child Quality Measures
<b>MIH</b>	Maternal and Infant Health Quality Measure
<b>PRA</b>	Paper Reduction Act of 1995



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

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

# **AQM, CQM & MIH - Not Reporting on a Measure PRA document**

---

**Version 1.0**

**08/24/2017**

**Document Number:** 250-QSSI-MACPro-PRA-NotReporting-D

**Contract Number:** HHSM-500-2007-00024I: HHSM-500-T0014



## Table of Contents

**1. Not Reporting on a Measure – Screenshots..... 1**  
    1.1 Not Reporting on a Measure ..... 1  
**Appendix A: Acronyms ..... 3**

## List of Figures

Figure 1: Not Reporting – 1 ..... 1  
Figure 2: Not Reporting – 2 ..... 2  
Figure 3: Not Reporting – 3 ..... 2

## List of Tables

Table 1: Acronyms ..... 3

# 1. Not Reporting on a Measure – Screenshots

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

## 1.1 Not Reporting on a Measure

**Are you reporting on this measure? \***

Yes

No

[View Implementation Guide](#)

**Please explain why you are not reporting on the measure:**

Select all that apply (must select at least one)

Service not covered

Population not covered

Data not available

Entire population not covered

Partial population not covered

**\* Explain the partial population not covered**

**Explain why data not available**

Select all that apply (must select at least one)

Budget Constraints

Staff Constraints

Data Inconsistencies/Accuracy

**\* Explain**

Data Source Not Easily Accessible

Select all that apply

Requires Medical Record Review

**Figure 1: Not Reporting – 1**

Requires Medical Record Review  
 Requires Data Linkage which does not currently exist  
 Other

\* Explain

Information Not Collected  
 Select all that apply  
 Not Collected by Provider (Hospital/Health Plan)  
 Other

\* Explain

Other  
 \* Explain

Small Sample Size (less than 30)  
 Other

Enter Specific Sample Size \*

Explain Other Reason Why Data Not Reported \*

Figure 2: Not Reporting – 2

Other  
 Explain Other Reason Why Data Not Reported \*

### Report Documents

+/-

**Saved Documents**

- Maximum documents that can be uploaded for this report: 84
- Maximum file size: 2MB
- Valid file extensions: pdf; ppt; doc; docx; xls; pptx

<input type="checkbox"/>	Name	Description	Date Created	↑	Updated By	Size	Type
No items available							

**Would you like to validate the core measure data at this time?**  
 Yes  No

(Note: While the measure does not need to be validated at this time in order to proceed, each measure must be validated for the measure to be marked as 'complete' and before the report can be submitted to CMS).

Figure 3: Not Reporting – 3

## Appendix A: Acronyms

Table 1: Acronyms

Acronym	Literal Translation
<b>AQM</b>	Adult Quality Measure
<b>CQM</b>	Child Quality Measures
<b>MIH</b>	Maternal and Infant Health Quality Measure
<b>PRA</b>	Paper Reduction Act of 1995



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

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

# **AQM, CQM & MIH - Other Performance Measure PRA document**

---

**Version 1.0**

**08/24/2017**

**Document Number:** 251-QSSI-MACPro-PRA-OPM-D

**Contract Number:** HHSM-500-2007-00024I: HHSM-500-T0014

## Table of Contents

**1. Other Performance Measure – Screenshots ..... 1**  
    1.1 Other Performance Measure..... 1  
**Appendix A: Acronyms ..... 2**

## List of Figures

Figure 1: Other Performance Measure..... 1

## List of Tables

Table 1: Acronyms ..... 2

# 1. Other Performance Measure – Screenshots

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

## 1.1 Other Performance Measure

**Other Performance Measure** +/-

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

**Please describe the other methodology used \***

Character count: 0/4000

Please describe the rate (e.g., 18-64)	Numerator	Denominator	Rate	
	0	0	0	Clear Row

+ Additional/Other Rate(s)

**Figure 1: Other Performance Measure**

## Appendix A: Acronyms

Table 1: Acronyms

Acronym	Literal Translation
<b>AQM</b>	Adult Quality Measure
<b>CQM</b>	Child Quality Measures
<b>MIH</b>	Maternal and Infant Health Quality Measure
<b>PRA</b>	Paper Reduction Act of 1995





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

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

# **AQM, CQM & MIH - Status of Data Reported PRA document**

---

**Version 1.0**

**08/24/2017**

**Document Number:** 252-QSSI-MACPro-PRA-StatusOfData-D

**Contract Number:** HHSM-500-2007-00024I: HHSM-500-T0014

## Table of Contents

<b>1. Status of Data Reported – Screenshots.....</b>	<b>1</b>
1.1 Status of Data Reported.....	1
<b>Appendix A: Acronyms .....</b>	<b>2</b>

## List of Figures

Figure 1: Status of Data Reported.....	1
--	---

## List of Tables

Table 1: Acronyms .....	2
-------------------------	---

# 1. Status of Data Reported – Screenshots

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

## 1.1 Status of Data Reported

**Status of Data Reported**

What is the status of the data being reported? \*

Provisional

Final

+/-

**Figure 1: Status of Data Reported**

## Appendix A: Acronyms

Table 1: Acronyms

Acronym	Literal Translation
<b>AQM</b>	Adult Quality Measure
<b>CQM</b>	Child Quality Measures
<b>MIH</b>	Maternal and Infant Health Quality Measure
<b>PRA</b>	Paper Reduction Act of 1995



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

**Medicaid and CHIP Program (MACPro)**  
**AQM, CQM & MIH - Technical Assistance PRA**  
**document**

---

**Version 1.0**  
**08/24/2017**

**Document Number:** 253-QSSI-MACPro-PRA-TechnicalAssistance-D

**Contract Number:** HHSM-500-2007-00024I: HHSM-500-T0014

## Table of Contents

**1. Technical Assistance – Screenshots ..... 1**

    1.1 Technical Assistance from the Admin Screen ..... 1

    1.2 Technical Assistance from a Core Measure ..... 2

**Appendix A: Acronyms ..... 3**

## List of Figures

Figure 1: Technical Assistance Admin - 1 ..... 1

Figure 2: Technical Assistance Admin – 2 ..... 1

Figure 3: Technical Assistance Core Measure – 1 ..... 2

Figure 4: Technical Assistance Core Measure – 2 ..... 2

## List of Tables

Table 1: Acronyms ..... 3

# 1. Technical Assistance – Screenshots

## 1.1 Technical Assistance from the Admin Screen

**Federal Fiscal Year**  
2017

[Close Technical Assistance](#)  
[View Implementation Guide](#)

### Technical Assistance

Technical assistance is available through the Technical Assistance and Analytic Support mailbox for questions about core set reporting, such as how to develop state rates based on data from multiple data sources, or questions about the measure technical specifications. Please refer to the Help Desk for more information about using the MACPro system.

A [Consolidated Implementation Guide](#) and [Technical Specifications and Resource Manual](#) are also available for further assistance.

**Do you have a Technical Assistance request for the Technical Assistance and Analytic Support mailbox in the current year? \***

Yes  
 No

**From**  
ZZ EDIT <sgattu@qssinc.com>

**CC**

Multiple email ids separated by comma can be entered

**Subject**  
ZZ-2017-AQM Admin Screen

Additional text in subject

**Message \***

Figure 1: Technical Assistance Admin - 1

**Do you want Technical Assistance with Quality Measures reporting in a future year? \***

Yes  
 No

**Please check the type of assistance you want \***

General  
 Specific

**Describe \***

Figure 2: Technical Assistance Admin – 2

## 1.2 Technical Assistance from a Core Measure

### Technical Assistance

Technical assistance is available through the Technical Assistance and Analytic Support mailbox for questions about core set reporting, such as how to develop state rates based on data from multiple data sources, or questions about the measure technical specifications. Please refer to the Help Desk for more information about using the MACPro system.

A [Consolidated Implementation Guide](#) and [Technical Specifications and Resource Manual](#) are also available for further assistance.

**Do you have a Technical assistance request for the Technical assistance and Analytic Support mailbox related to the measure in the current year? \***

- Yes
- No

**From**

ZZ EDIT <sgattu@qssinc.com>

**CC**

Multiple email ids separated by comma can be entered

**Subject**

ZZ-2017-AQM-Adult Body Mass Index Assessment

Additional text in subject

**Message \***

Character count: 0/4000

**Figure 3: Technical Assistance Core Measure – 1**

**Do you want Technical Assistance with reporting this measure in a future year? \***

- Yes
- No

SEND REQUEST

**Figure 4: Technical Assistance Core Measure – 2**



## Appendix A: Acronyms

Table 1: Acronyms

Acronym	Literal Translation
<b>AQM</b>	Adult Quality Measure
<b>CQM</b>	Child Quality Measures
<b>MIH</b>	Maternal and Infant Health Quality Measure
<b>PRA</b>	Paper Reduction Act of 1995