



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

Medicaid and CHIP Program (MACPro)

HHQM - Admin-Hybrid PRA document

Version 1.0

08/21/2017

Document Number: 202-QSSI-MACPro-PRA-HHQM-HH4a-D

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

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1. Data Source

1.1 Admin Data Screen

The screenshot displays the 'Admin Data Screen' for HEDIS (Healthcare Effectiveness Data and Information Set). The interface includes a top navigation bar with 'News', 'Tasks (5)', 'Records', 'Reports', and 'Actions'. A user profile for 'Applan' is visible in the top right. The main content area is titled 'Data Source' and contains two sections: 'Administrative Data' and 'Hybrid (Administrative and Medical Records Data)'. Both sections are checked. The 'Administrative Data' section has a sub-section 'From where is the Administrative Data coming?' with the instruction 'Must select one or more'. It includes checked options for 'Medicaid Management Information System (MMIS)' and 'Other', followed by a text input field labeled '* Specify' with a character count of 0/2000. The 'Hybrid' section has a similar sub-section 'From where is the Administrative Data coming?' with checked options for 'Medicaid Management Information System (MMIS)' and 'Other', and another '* Specify' text input field with a character count of 0/2000. Below this, there is a sub-section 'From where is the Medical Records coming?' with the instruction 'Must select only one' and a radio button selected for 'Electronic Health Record (EHR) Data'.

Figure 1: Administrative Data

1.2 Hybrid Data Screen

News Tasks (5) **Records** Reports Actions

Appian

Hybrid (Administrative and Medical Records Data)

Other

*** Specify**

Character count: 0/2000

From where is the Administrative Data coming?
Must select one or more

Medicaid Management Information System (MMIS)

Other

*** Specify**

Character count: 0/2000

From where is the Medical Records coming?
Must select only one

Electronic Health Record (EHR) Data

Paper

Both (EHR and Paper)

Specify*

Figure 2: Hybrid Data

Appendix A: Acronyms

Table 1: Acronyms

Acronym	Literal Translation
HHQM	Health Homes Quality Measure
PRA	Paper Reduction Act of 1995



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

Medicaid and CHIP Program (MACPro)
HHQM - Admin Questions PRA document

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1. Administrative Questions and Cost Saving Data

1.1 Administrative Questions Screen

The screenshot shows a web application interface with a dark blue header. The header contains navigation links: "News", "Tasks (5)", "Records", "Reports", and "Actions" (which is highlighted with a yellow underline). On the right side of the header, there is a user profile icon and the name "Appian". Below the header, the main content area has a title "Administrative Questions and Cost Savings Data". The form is divided into two main sections: "Administrative Questions" and "Cost Savings Data".

Administrative Questions

Please indicate the total annual number of individuals in the Health Homes Program *

Please indicate the total annual number of adults and children

* Adults

* Children

Please indicate the number of Health Homes providers operating under the Health Homes program *

Cost Savings Data

Provide cost savings for the calendar year 2015

Amount of cost savings

* \$

Please describe your cost savings methodology in the box below *

Figure 1: Administrative Questions

1.2 Cost Saving Data

News Tasks (5) Records Reports **Actions** Appian

Please indicate the total annual number of adults and children

*Adults

*Children

Please indicate the number of Health Homes providers operating under the Health Homes program *

Cost Savings Data

Provide cost savings for the calendar year 2015

Amount of cost savings

*\$

Please describe your cost savings methodology in the box below *

If you would like to provide additional information regarding cost savings data, you may upload a document.

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; xlsx; pptx

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

Figure 2: Cost Saving Data

1.3 Report Documents

News Tasks (5) Records Reports **Actions** Appian

If you would like to provide additional information regarding cost savings data, you may upload a document.

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; xlsx; pptx

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

PRA Disclosure Statement: According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0938-1188. The time required to complete this information collection is estimated to average 40 hours per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: CMS, 7500 Security Boulevard, Attn: PRA Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850.

Figure 3: Report Documents

Appendix A: Acronyms

Table 1: Acronyms

Acronym	Literal Translation
HHQM	Health Homes Quality Measure
PRA	Paper Reduction Act of 1995



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

Medicaid and CHIP Program (MACPro)

HHQM - Admin Screen PRA document

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1. Health Homes Quality Measures

1.1 Welcome to Health Homes Quality Measures Screen

Welcome to the Health Homes Quality Measures

CMS-10434 OMB 0938-1188

[Request System Help](#)

[Request Technical Assistance](#)

[View Implementation Guide](#)

Federal Fiscal Year *

The Health Homes provision, authorized by section 2703 of the Affordable Care Act (section 1945 of the Social Security Act), provides an opportunity to build a person-centered care delivery model that focuses on improving outcomes and disease management for beneficiaries with chronic conditions. The Health Homes core set of quality measures will be used to evaluate care across all state Health Homes programs. Specifically, section 2703 requires Health Homes providers to report health care quality measures in order to receive payment. The recommended Health Homes core set will require reporting at the Health Homes provider level which the state will collect and aggregate at the Health Homes program level.

Choose State Plan Amendment (SPA) *

View Admin Screen [here](#).

Administrative Questions and Cost Savings Data

Administrative Questions

Please indicate the total annual number of individuals in the Health Homes Program *

Please indicate the total annual number of adults and children

Figure 1: Welcome Page

Appendix A: Acronyms

Table 1: Acronyms

Acronym	Literal Translation
HHQM	Health Homes Quality Measure
PRA	Paper Reduction Act of 1995



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

Medicaid and CHIP Program (MACPro)

HHQM-ABA PRA document

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1. Health Homes Quality Measure

1.1 Adult Body Mass Index (BMI) Assessment (ABA) - Path 1

Adult Body Mass Index (BMI) Assessment (ABA)

CMS-10434 OMB 0938-1188

Health Homes Quality Measure - NV - 2016

[Request System Help](#)

[REQUEST TECHNICAL ASSISTANCE](#)

[CLEAR](#)

[VIEW ALL RESPONSES](#)

Are you reporting on this measure? *

Yes

No

[View Implementation Guide](#)

Measurement Specification

+/-

National Committee for Quality Assurance (NCQA)/Healthcare Effectiveness Data and Information Set (HEDIS)

Other

Data Source

+/-

Administrative Data

Hybrid (Administrative and Medical Records Data)

Figure 1: ABA- Reporting Yes

1.2 Measurement Specification – Path 1

The screenshot shows a web application interface for reporting on the ABA measure. The top navigation bar includes 'News', 'Tasks (4)', 'Records' (highlighted), 'Reports', and 'Actions'. A user profile icon for 'Applan' is visible in the top right. The main content area is divided into sections: 'Yes' (selected), 'No', 'Measurement Specification', 'Data Source', and 'Date Range'. In the 'Measurement Specification' section, 'National Committee for Quality Assurance (NCQA)/Healthcare Effectiveness Data and Information Set (HEDIS)' is selected. A dropdown menu for 'Specify version of HEDIS used *' is set to 'Select Year', with a note below stating 'HEDIS: Healthcare Effectiveness Data and Information Set'. The 'Data Source' section has 'Administrative Data' selected. The 'Date Range' section includes a detailed instruction: 'Please define the date range for the reporting period based on the "From" time period as the month and year that corresponds to the beginning period in which utilization took place and please report the "To" time period as the month and year that corresponds to the end period in which utilization took place. Do not report the year in which data were collected from the measure, or the version of HEDIS® used to calculate the measure, both of which may be different from the period corresponding to the utilization of services.' Below this, there are two dropdown menus for 'Start Date', labeled 'Month' and 'Year', both set to 'Select Month' and 'Select Year' respectively.

Figure 2: Measurement Specification 1

1.3 Measurement Specification – Path 2

The screenshot shows the 'Records' tab in the Appian interface. At the top, there are navigation tabs: News, Tasks (4), Records (selected), Reports, and Actions. A user profile icon for 'Appian' is in the top right. Below the tabs, there are radio buttons for 'Yes' (selected) and 'No'. The main section is titled 'Measurement Specification' and includes an 'Explain *' text area. Below this is the 'Data Source' section with checkboxes for 'Administrative Data', 'Hybrid (Administrative and Medical Records Data)', and 'Other'. The 'Date Range' section contains a paragraph of instructions and a 'Start Date' label. The interface has a blue header and a light blue sidebar.

Figure 3: Measurement Specification 2

1.4 Date Range

This screenshot focuses on the 'Date Range' section of the form. It shows the 'Start Date' and 'End Date' fields. The 'Start Date' is set to 'September' for the month and '2002' for the year. The 'End Date' is set to 'October' for the month and '2009' for the year. Below these fields is the 'Definition of Population Included in the Measure' section, which includes a 'Definition of Denominator' label. The interface elements are consistent with the previous screenshot, showing the 'Records' tab and the 'Appian' user profile.

Figure 4: Date Range - Start and End Date

1.5 Definition of Population Included in the Measure

News Tasks (4) **Records** Reports Actions

Month Year

Definition of Population Included in the Measure

Definition of Denominator
Select all that apply

- Denominator includes Medicaid population
- 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

Which delivery systems are represented in the Denominator?
Select all delivery systems that cover the measure-eligible population in your state. For each delivery system selected, report the percentage of the measure-eligible population that is represented in the data reported for the measure and the number of the health plans included (where applicable).

Figure 5: Definition of Population Included in the Measure

1.6 Denominator Representation

News Tasks (5) **Records** Reports Actions

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?
Select all delivery systems that cover the measure-eligible population in your state. For each delivery system selected, report the percentage of the measure-eligible population that is represented in the data reported for the measure and the number of the health plans included (where applicable).

User must select at least one of the following

- Fees-for-Service (FFS)
- Primary Care Case Management (PCCM)
- Managed Care Organization / Pre-paid Inpatient Health Plan (MCO/PIHP)
- Integrated Care Models (ICM)
- Other

Are all Health Home Providers represented in the denominator? *


Yes
 No

Explain which populations are excluded and why *

Please explain *

Figure 6: Denominator Representation 1

1.7 Delivery Systems

News Tasks (4) **Records** Reports Actions 

Which delivery systems are represented in the Denominator?
Select all delivery systems that cover the measure-eligible population in your state. For each delivery system selected, report the percentage of the measure-eligible population that is represented in the data reported for the measure and the number of the health plans included (where applicable).

- Fees-for-Service (FFS)
Percentage of measure-eligible state population represented in data reported *
- Primary Care Case Management (PCCM)
Percentage of measure-eligible state population represented in data reported *
- Managed Care Organization / Pre-paid Inpatient Health Plan (MCO/PIHP)
Number of Health Plans *

Percentage of measure-eligible state population represented in data reported *
- Integrated Care Models (ICM)
Percentage of measure-eligible state population represented in data reported *
- Other
Describe *

Percentage of measure-eligible state population represented in data reported *

If applicable, list the number of Health Plans represented

Are all Health Home Providers represented in the denominator? *

Yes
 No

Figure 7: Denominator Representation 2

1.8 Health Home Providers Representation

The screenshot shows the 'Records' tab with a navigation bar containing 'News', 'Tasks (5)', 'Records', 'Reports', and 'Actions'. The user profile 'Appian' is visible in the top right. The main content area includes a question: 'Are all Health Home Providers represented in the denominator?*' with radio buttons for 'Yes' and 'No' (selected). Below this is a 'Performance Measure' section with a description: 'The percentage of Health Home enrollees ages 18 to 74 who had an outpatient visit and whose body mass index (BMI) was documented during the measurement year or the year prior to the measurement year.' There are checkboxes for 'Age Range: 18-64' and 'Age Range: 65-74', both of which are unchecked. Each checkbox is followed by a text box labeled 'Please explain why data was not entered for this numerator/denominator/rate set *'. A 'Character count: 0/2000' indicator is present below each text box. At the top right of the form area, there is a field for 'If applicable, list the number of Health Plans represented' and a 'Please explain *' text box.

Figure 8: Denominator Representation 3

1.9 Performance Measure (Checked all age range) Path – 1

The screenshot shows the 'Records' tab with the same navigation bar and user profile as Figure 8. The 'Performance Measure' section is expanded, showing the description: 'The percentage of Health Home enrollees ages 18 to 74 who had an outpatient visit and whose body mass index (BMI) was documented during the measurement year or the year prior to the measurement year.' Three checkboxes are now checked: 'Age Range: 18-64', 'Age Range: 65-74', and 'Age Range: Total'. Below each checked checkbox is a table with three columns: 'Numerator', 'Denominator', and 'Rate'. All three columns in each table contain the value '0'. At the bottom of the form, there is a text box for 'Additional Notes/Comments on Measure' and a 'Character count: 0/2000' indicator. A link for 'Deviations from Measure Specifications' is located at the bottom left of the form area.

Figure 9: Performance Measure 1

1.10 Performance Measure (Checked one age range) Path – 2

Performance Measure +/-

The percentage of Health Home enrollees ages 18 to 74 who had an outpatient visit and whose body mass index (BMI) was documented during the measurement year or the year prior to the measurement year.

Age Range: 18-64

Numerator	Denominator	Rate
0	0	0

Age Range: 65-74

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

Character count: 0/2000

The option "Denominator includes Medicare and Medicaid Dually-Eligible population" was selected in the "Definition of Population included in the Measure" section; however, no data were reported for the population age 65 and older. Are data available for population age 65 and over? *

Yes
 No

Age Range: Total

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

Figure 10: Performance Measure 2

1.11 Age Range 65-74, Option Yes, Path 2a

Performance Measure +/-

The percentage of Health Home enrollees ages 18 to 74 who had an outpatient visit and whose body mass index (BMI) was documented during the measurement year or the year prior to the measurement year.

Age Range: 18-64

Numerator	Denominator	Rate
0	0	0

Age Range: 65-74

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

Character count: 0/2000

The option "Denominator includes Medicare and Medicaid Dually-Eligible population" was selected in the "Definition of Population included in the Measure" section; however, no data were reported for the population age 65 and older. Are data available for population age 65 and over? *

Yes
 No

Please either:

1. enter a N/D/R for this age group.
2. return to the "Definition of Population included in the Measure" section and de-select the option "Denominator includes Medicare and Medicaid Dually-Eligible population", or
3. explain below why data were not reported for age 65 and older (for example if the 65 and older group were combined with the 18-64 age group).

"Denominator includes Medicare and Medicaid Dually-Eligible population" was

Figure 11: Performance Measure 3

News Tasks (4) **Records** Reports Actions

and older group were combined with the 18-64 age group).

"Denominator includes Medicare and Medicaid Dually-Eligible population" was selected, but a numerator, denominator, and rate were not reported for the 65 and older population. Please explain why *

Age Range: Total

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

Character count: 0/2000

Additional Notes/Comments on Measure

Character count: 0/2000

[Deviations from Measure Specifications](#)

Figure 12: Performance Measure 4

1.12 Age Range 65-74, Option No, Path 2b

News Tasks (4) **Records** Reports Actions

0	0	0
---	---	---

Age Range: 65-74

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

Character count: 0/2000

The option "Denominator includes Medicare and Medicaid Dually-Eligible population" was selected in the "Definition of Population included in the Measure" section; however, no data were reported for the population age 65 and older. Are data available for population age 65 and over? *

Yes

No

If applicable, please return to the "Definition of Population included in the Measure" section and de-select the option "Denominator includes Medicare and Medicaid Dually-Eligible population" or provide explanation below.

"Denominator includes Medicare and Medicaid Dually-Eligible population" was not de-selected, please explain why *

Age Range: Total

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

Character count: 0/2000

Figure 13: Performance Measure 5

1.13 Other Performance Measure

Other Performance Measure

Please describe the other methodology used *

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

+ Additional/Other Rate(s)

Additional Notes/Comments on Measure

Combined Rate(s) from Multiple Reporting Units

Did you Combine Rates from Multiple Reporting Units (e.g., Health Home Providers) to Create a Health Home 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

The rates are not weighted

Figure 14: Other Performance Measure

1.14 Deviations from Measure Specifications

Deviations from Measure Specifications

Did your calculation of the measure deviate from the measure specification in any way? *

Yes

No

Please select and explain the deviation(s)

Age Range: 18-64

Numerator

Explain *

Denominator

Explain *

Other

Explain *

Age Range: 65-74

Figure 15: Deviations from Measure Specifications 1

News Tasks (5) **Records** Reports Actions Applan

Age Range: 65-74
 Numerator

Denominator

Other

Age Range: Total
 Numerator

Denominator

Other

Explain *

Explain *

Explain *

Explain *

Figure 16: Deviations from Measure Specifications 2

News Tasks (5) **Records** Reports Actions Applan

Age Range: Total
 Numerator

Denominator

Other

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

Did you Combine Rates from Multiple Reporting Units (e.g., Health Home Providers) to Create a Health Home 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

Figure 17: Deviations from Measure Specifications 3

1.15 Optional Measure Stratification

News Tasks (5) **Records** Reports Actions Appian

Optional Measure Stratification

If this measure is also reported by additional classifications/sub-categories, e.g. racial, ethnic, sex, language, disability status, or geography, complete the following as applicable.

Check all that apply

Race (Non-Hispanic)

White

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65-74	0	0	0	Clear Row

+ Additional/Alternative Classification/Sub-category

Black or African American

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65-74	0	0	0	Clear Row

+ Additional/Alternative Classification/Sub-category

American Indian or Alaska Native

Figure 18: Optional Measure Stratification 1

News Tasks (5) **Records** Reports Actions Appian

Age Range: 65-74	0	0	0	Clear Row
------------------	---	---	---	-----------

+ Additional/Alternative Classification/Sub-category

American Indian or Alaska Native

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65-74	0	0	0	Clear Row

+ Additional/Alternative Classification/Sub-category

Asian

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65-74	0	0	0	Clear Row

+ Additional/Alternative Classification/Sub-category

Native Hawaiian or Other Pacific Islander

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 18-64	0	0	0	Clear Row

Figure 19: Optional Measure Stratification 2

News Tasks (5) **Records** Reports Actions Appian

Native Hawaiian or Other Pacific Islander

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65-74	0	0	0	Clear Row

+ Additional/Alternative Classification/Sub-category

+ Additional Race(s)

Ethnicity

Hispanic or Latino

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65-74	0	0	0	Clear Row

+ Additional/Alternative Classification/Sub-category

Not Hispanic or Latino

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65-74	0	0	0	Clear Row

Figure 20: Optional Measure Stratification 3

News Tasks (5) **Records** Reports Actions Appian

+ Additional/Alternative Classification/Sub-category

Not Hispanic or Latino

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65-74	0	0	0	Clear Row

+ Additional/Alternative Classification/Sub-category

+ Additional Ethnicity(ies)

Sex

Male

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65-74	0	0	0	Clear Row

+ Additional/Alternative Classification/Sub-category

Female

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 18-64	0	0	0	Clear Row

Figure 21: Optional Measure Stratification 4

News Tasks (5) **Records** Reports Actions Appian

Female

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65-74	0	0	0	Clear Row

+ Additional/Alternative Classification/Sub-category

Primary Spoken Language

English

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65-74	0	0	0	Clear Row

+ Additional/Alternative Classification/Sub-category

Spanish

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65-74	0	0	0	Clear Row

Figure 22: Optional Measure Stratification 5

News Tasks (5) **Records** Reports Actions Appian

Age Range: 65-74 0 0 0 Row

+ Additional/Alternative Classification/Sub-category

+ Additional Primary Spoken Language(s)

Disability Status

SSI

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65-74	0	0	0	Clear Row

+ Additional/Alternative Classification/Sub-category

Non-SSI

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65-74	0	0	0	Clear Row

+ Additional/Alternative Classification/Sub-category

+ Additional Disability Status(es)

Geography

Urban

Figure 23: Optional Measure Stratification 6

The screenshot displays the 'Records' tab in the CMS XLC interface. It shows a section for 'Additional Disability Status(es)' with 'Geography' checked, and sub-categories 'Urban' and 'Rural' also checked. There are two tables, one for 'Urban' and one for 'Rural'. Each table has columns for 'Classification/Sub-category', 'Numerator', 'Denominator', and 'Rate'. The 'Rate' column contains input fields with a value of 0. Below the tables is a 'Final Comments (Optional)' section with a text area and a '+/-' toggle.

Figure 24: Optional Measure Stratification 7

1.16 Final Comments and Report Documents

The screenshot displays the 'Records' tab in the CMS XLC interface. It shows a section for 'Final Comments (Optional)' with a text area and a '+/-' toggle. Below this is a 'Report Documents' section with a '+/-' toggle. Under 'Report Documents', there is a 'Saved Documents' section with a list of documents. The list is currently empty, displaying 'No items available'. There are 'UPLOAD', 'DELETE DOCUMENT(S)', and 'SAVE DOCUMENT(S)' buttons.

Figure 25: Final Comments and Report Documents


1.17 Adult Body Mass Index (BMI) Assessment (ABA) – Path 2

The screenshot shows the 'Records' tab in the Appian interface. The main heading is 'Are you reporting on this measure? *'. Below it, there are two radio buttons: 'Yes' (unselected) and 'No' (selected). Underneath, there is a section titled 'Please explain why you are not reporting on the measure' with the instruction 'Select all that apply (must select at least one)'. There are three checkboxes: 'Service not covered' (checked), 'Population not covered' (checked), and 'Data not available' (checked). To the right, there is a section 'Portion of population not covered *' with two radio buttons: 'Entire population not covered' (unselected) and 'Partial population not covered' (selected). Below this is a text box labeled '* Explain the partial population not covered'. Further down is a section 'Explain why data not available' with the instruction 'Select all that apply (must select at least one)'. There are three checkboxes: 'Budget Constraints' (checked), 'Staff Constraints' (checked), and 'Data Inconsistencies/Accuracy' (checked). Below this is a text box labeled '* Please explain'. At the bottom, there are two more checkboxes: 'Data not submitted by Providers to State' (checked) and 'Data source not easily accessible' (checked). The Appian logo and 'View Implementation Guide' link are visible in the top right corner.

Figure 26: ABA Reporting – No

This screenshot shows the continuation of the ABA Reporting form. It displays several checked checkboxes: 'Data not submitted by Providers to State' and 'Data source not easily accessible'. Below these is a section titled 'Reason' with the instruction 'Select all that apply'. There are three checkboxes: 'Requires medical record review' (checked), 'Requires data linkage, which does not currently exist' (checked), and 'Other' (checked). Below this is a text box labeled '* Please explain'. The next section is 'Information not collected' (checked), with a 'Reason' section containing 'Not collected by provider (hospital/health plan)' (checked) and 'Other' (checked). Below this is another text box labeled '* Please explain'. The final section is 'Other' (checked), with a text box labeled '* Please explain'. The Appian logo and 'View Implementation Guide' link are visible in the top right corner.

Figure 27: ABA Reporting – No

News Tasks (5) **Records** Reports Actions  Applan

Small sample size (less than 30)

Continuous enrollment requirement not met due to start date of SPA

Other

Other
* Please explain

Enter specific sample size *

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; xlsx; pptx

<input type="checkbox"/>	Name	Description	Date Created	Updated By	Size	Type
--------------------------	------	-------------	--------------	------------	------	------

Figure 28: ABA Reporting – No

Appendix A: Acronyms

Table 1: Acronyms

Acronym	Literal Translation
HHQM	Health Homes Quality Measure
ABA	Adult Body Mass Index (BMI) Assessment
PRA	Paper Reduction Act of 1995



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

Medicaid and CHIP Program (MACPro)

HHQM - AMB PRA document

Version 1.0

08/22/2017

Document Number: 225-QSSI-MACPro-PRA-HHQM-AMB-D

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

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1. Health Homes Quality Measure

1.1 Ambulatory Care – Emergency Department Visits (AMB) – Path 1

News Tasks (6) **Records** Reports Actions Applan

Ambulatory Care - Emergency Department Visits (AMB)
CMS-10434 OMB 0938-1188

Health Homes Quality Measure - NV - 2016

Request System Help

REQUEST TECHNICAL ASSISTANCE CLEAR VIEW ALL RESPONSES

View Implementation Guide

Are you reporting on this measure? *

Yes
 No

Measurement Specification

National Committee for Quality Assurance (NCQA)/Healthcare Effectiveness Data and Information Set (HEDIS)
 Other

Data Source

Administrative Data Only
 Other

Date Range

Please define the date range for the reporting period based on the "From" time period as the month and year that corresponds to the beginning period in which utilization took place and please report the "To" time period as the month and year that corresponds to the end period in which utilization took place. Do not report the year in which data were collected from the measure, or the version of HEDIS® used to calculate the measure, both of which may be different from the period corresponding to the utilization of services.

Start Date

Select Month Select Year

Month Year

End Date

Select Month Select Year

Month Year

Figure 1: AMB Reporting – Yes

1.2 Measurement Specification – Path 1

News Tasks (6) **Records** Reports Actions Applan

Ambulatory Care - Emergency Department Visits (AMB)
CMS-10434 OMB 0938-1188

Health Homes Quality Measure - NV - 2016

Request System Help

REQUEST TECHNICAL ASSISTANCE CLEAR VIEW ALL RESPONSES

View Implementation Guide

Are you reporting on this measure? *

Yes
 No

Measurement Specification

National Committee for Quality Assurance (NCQA)/Healthcare Effectiveness Data and Information Set (HEDIS)
 Other

Specify version of HEDIS used *

Select Year

HEDIS: Healthcare Effectiveness Data and Information Set

Data Source

Administrative Data Only
 Other

Figure 2: Measurement Specification 1

1.3 Measurement Specification – Path 2

News Tasks (6) **Records** Reports Actions Applan

Measurement Specification +/-

National Committee for Quality Assurance (NCQA)/Healthcare Effectiveness Data and Information Set (HEDIS) **Explain ***

Other

Data Source +/-

Administrative Data Only

Other

Date Range +/-

Please define the date range for the reporting period based on the "From" time period as the month and year that corresponds to the beginning period in which utilization took place and please report the "To" time period as the month and year that corresponds to the end period in which utilization took place. Do not report the year in which data were collected from the measure, or the version of HEDIS® used to calculate the measure, both of which may be different from the period corresponding to the utilization of services.

Figure 3: Measurement Specification 2

1.4 Date Range

News Tasks (4) **Records** Reports Actions Applan

Administrative Data

Hybrid (Administrative and Medical Records Data)

Other

Date Range +/-

Please define the date range for the reporting period based on the "From" time period as the month and year that corresponds to the beginning period in which utilization took place and please report the "To" time period as the month and year that corresponds to the end period in which utilization took place. Do not report the year in which data were collected from the measure, or the version of HEDIS® used to calculate the measure, both of which may be different from the period corresponding to the utilization of services.

Start Date

September 2002

Month Year

End Date

October 2009

Month Year

Definition of Population Included in the Measure +/-

Definition of Denominator

Select all that apply.

Figure 4: Date Range

1.5 Definition of Population Included in the Measure

Definition of Population Included in the Measure

Definition of Denominator
Select all that apply

- Denominator includes Medicaid population
- Denominator includes Medicare and Medicaid Dualy-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 *

Figure 5: Denominator Representation 1

1.6 Selection of Delivery Systems

Which delivery systems are represented in the Denominator?
Select all delivery systems that cover the measure-eligible population in your state. For each delivery system selected, report the percentage of the measure-eligible population that is represented in the data reported for the measure and the number of the health plans included (where applicable).

- Fees-for-Service (FFS)
- Primary Care Case Management (PCCM)
- Managed Care Organization / Pre-paid Inpatient Health Plan (MCO/PIHP)
- Integrated Care Models (ICM)
- Other

Percentage of measure-eligible state population represented in data reported *

Percentage of measure-eligible state population represented in data reported *

Number of Health Plans *

Percentage of measure-eligible state population represented in data reported *

Percentage of measure-eligible state population represented in data reported *

Describe *

Percentage of measure-eligible state population represented in data reported *

If applicable, list the number of Health Plans represented

Are all Health Home Providers represented in the denominator?*

Yes

No

Performance Measure

Number of inpatient hospital admissions for ambulatory care sensitive chronic conditions per 100,000 enrollee months for Health Home enrollees age 18 and older. This measure includes adult hospital admissions for diabetes with short-term complications, diabetes with long-term complications, uncontrolled diabetes without complications, diabetes with lower-extremity amputation, chronic obstructive pulmonary disease, asthma, hypertension, heart failure, or angina without a cardiac procedure.

Figure 6: Denominator Representation 2

1.7 Health Home Providers Representation

Figure 7: Denominator Representation 3

1.8 Performance Measure (checked all age range) Path - 1

Age Range	ED Visits	Enrollee Months	Visits per 1,000 Enrollee Months
<input checked="" type="checkbox"/> Age Range: 0-17	0	0	0
<input checked="" type="checkbox"/> Age Range: 18-64	0	0	0
<input checked="" type="checkbox"/> Age Range: 65 and older	0	0	0
<input checked="" type="checkbox"/> Age Range: Total	0	0	0

Figure 8: Performance Measure 1

1.9 Performance Measure (Check one age range) Path -2 Option Yes

News Tasks (6) **Records** Reports Actions
Applan

Performance Measure

The rate of emergency department (ED) visits per 1,000 enrollee months among Health Home enrollees.

Age Range: 0-17

ED Visits	Enrollee Months	Visits per 1,000 Enrollee Months
0	0	0

Age Range: 18-64

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

Character count: 0/2000

Age Range: 65 and older

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

Character count: 0/2000

The option "Denominator includes Medicare and Medicaid Dually-Eligible population" was selected in the "Definition of Population Included in the Measure" section; however, no data were reported for the population age 65 and older. Are data available for population age 65 and over? *

Yes
 No

Please either:

1. enter a N/D/R for this age group.
2. return to the "Definition of Population Included in the Measure" section and de-select the option "Denominator includes Medicare and Medicaid Dually-Eligible population", or
3. explain below why data were not reported for age 65 and older (for example if the 65 and older group were combined with the 18-64 age group).

"Denominator includes Medicare and Medicaid Dually-Eligible population" was selected, but a numerator, denominator, and rate were not reported for the 65 and older population. Please explain why *

Age Range: Total

Figure 9: Performance Measure 2

1.10 Performance Measure (Check one age range) Path – 2 Option No

News Tasks (6) **Records** Reports Actions Applan

Performance Measure

The rate of emergency department (ED) visits per 1,000 enrollee months among Health Home enrollees.

Age Range: 0-17

ED Visits	Enrollee Months	Visits per 1,000 Enrollee Months
0	0	0

Age Range: 18-64
Please explain why data was not entered for this numerator/denominator/rate set *

Character count: 0/2000

Age Range: 65 and older
Please explain why data was not entered for this numerator/denominator/rate set *

Character count: 0/2000

The option "Denominator includes Medicare and Medicaid Dually-Eligible population" was selected in the "Definition of Population Included in the Measure" section; however, no data were reported for the population age 65 and older. Are data available for population age 65 and over? *

Yes
 No

If applicable, please return to the "Definition of Population Included in the Measure" section and de-select the option "Denominator includes Medicare and Medicaid Dually-Eligible population" or provide explanation below.

"Denominator includes Medicare and Medicaid Dually-Eligible population" was not de-selected, please explain why *

Age Range: Total
Please explain why data was not entered for this numerator/denominator/rate set *

Figure 10: Performance Measure 3

1.11 Other Performance Measure

News Tasks (6) **Records** Reports Actions Applan

Other Performance Measure

Please describe the other methodology used *

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

+ Additional/Other Rate(s)

Additional Notes/Comments on Measure

Combined Rate(s) from Multiple Reporting Units

Figure 11: Other Performance Measure

1.12 Deviations from Measure Specifications

Character count: 0/2000

Deviations from Measure Specifications

Did your calculation of the measure deviate from the measure specification in any way? *

Yes
 No

Please select and explain the deviation(s)

Age Range: 0-17
 Numerator Explain *
 Denominator Explain *
 Other Explain *

Age Range: 18-64
 Numerator Explain *
 Denominator Explain *
 Other Explain *

Age Range: 65 and older
 Numerator Explain *
 Denominator Explain *
 Other Explain *

Figure 12: Deviations from Measure Specifications 1

Character count: 0/2000

Deviations from Measure Specifications

Did your calculation of the measure deviate from the measure specification in any way? *

Yes
 No

Please select and explain the deviation(s)

Age Range: 0-17
 Numerator Explain *
 Denominator Explain *
 Other Explain *

Age Range: 18-64
 Numerator Explain *
 Denominator Explain *
 Other Explain *

Age Range: 65 and older
 Numerator Explain *
 Denominator Explain *
 Other Explain *

Figure 13: Deviations from Measure Specifications 2

News Tasks (6) **Records** Reports Actions

Applan

Denominator

Explain *

Other

Explain *

Age Range: Total

Numerator

Explain *

Denominator

Explain *

Other

Explain *

Combined Rate(s) from Multiple Reporting Units

Did you Combine Rates from Multiple Reporting Units (e.g., Health Home Providers) to Create a Health Home State-Level Rate? *

+/-

Figure 14: Deviations from Measure Specifications 3

1.13 Optional Measure Stratification

News Tasks (6) **Records** Reports Actions Applan

No

Optional Measure Stratification

If this measure is also reported by additional classifications/sub-categories, e.g. racial, ethnic, sex, language, disability status, or geography, complete the following as applicable.

Check all that apply

Race (Non-Hispanic)

White

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 0-17	0	0	0	Clear Row
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65 and older	0	0	0	Clear Row

+ Additional/Alternative Classification/Sub-category

Black or African American

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 0-17	0	0	0	Clear Row
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65 and older	0	0	0	Clear Row

+ Additional/Alternative Classification/Sub-category

American Indian or Alaska Native

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 0-17	0	0	0	Clear Row
Age Range: 18-64	0	0	0	Clear Row

Figure 15: Optional Measure Stratification 1

News Tasks (6) **Records** Reports Actions Applan

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65 and older	0	0	0	Clear Row

+ Additional/Alternative Classification/Sub-category

Asian

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 0-17	0	0	0	Clear Row
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65 and older	0	0	0	Clear Row

+ Additional/Alternative Classification/Sub-category

Native Hawaiian or Other Pacific Islander

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 0-17	0	0	0	Clear Row
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65 and older	0	0	0	Clear Row

+ Additional/Alternative Classification/Sub-category

+ Additional Race(s)

Ethnicity

Hispanic or Latino

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 0-17	0	0	0	Clear Row

Figure 16: Optional Measure Stratification 2

Not Hispanic or Latino			
Classification/Sub-category	Numerator	Denominator	Rate
Age Range: 0-17	0	0	0
Age Range: 18-64	0	0	0
Age Range: 65 and older	0	0	0

+ Additional/Alternative Classification/Sub-category

+ Additional Ethnicities)

Sex

Male

Male			
Classification/Sub-category	Numerator	Denominator	Rate
Age Range: 0-17	0	0	0
Age Range: 18-64	0	0	0
Age Range: 65 and older	0	0	0

+ Additional/Alternative Classification/Sub-category

Female

Female			
Classification/Sub-category	Numerator	Denominator	Rate
Age Range: 0-17	0	0	0
Age Range: 18-64	0	0	0
Age Range: 65 and older	0	0	0

+ Additional/Alternative Classification/Sub-category

Primary Spoken Language

Figure 17: Optional Measure Stratification 3

Primary Spoken Language			
English			
Classification/Sub-category	Numerator	Denominator	Rate
Age Range: 0-17	0	0	0
Age Range: 18-64	0	0	0
Age Range: 65 and older	0	0	0

+ Additional/Alternative Classification/Sub-category

Spanish

Spanish			
Classification/Sub-category	Numerator	Denominator	Rate
Age Range: 0-17	0	0	0
Age Range: 18-64	0	0	0
Age Range: 65 and older	0	0	0

+ Additional/Alternative Classification/Sub-category

+ Additional Primary Spoken Language(s)

Disability Status

SSI

SSI			
Classification/Sub-category	Numerator	Denominator	Rate
Age Range: 0-17	0	0	0
Age Range: 18-64	0	0	0
Age Range: 65 and older	0	0	0

+ Additional/Alternative Classification/Sub-category

None

Figure 18: Optional Measure Stratification 4

The screenshot displays three tables for optional measure stratification, each with a 'Clear Row' button next to the Rate column. The tables are for Non-SSI, Urban, and Rural categories. Each table has columns for Classification/Sub-category, Numerator, Denominator, Rate, and a Clear Row button.

Classification/Sub-category	Numerator	Denominator	Rate	Clear Row
Age Range: 0-17	0	0	0	Clear Row
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65 and older	0	0	0	Clear Row

Classification/Sub-category	Numerator	Denominator	Rate	Clear Row
Age Range: 0-17	0	0	0	Clear Row
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65 and older	0	0	0	Clear Row

Classification/Sub-category	Numerator	Denominator	Rate	Clear Row
Age Range: 0-17	0	0	0	Clear Row
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65 and older	0	0	0	Clear Row

Figure 19: Optional Measure Stratification 5

1.14 Final Comments and Report Documents

The screenshot displays the 'Final Comments (Optional)' and 'Report Documents' sections. The 'Final Comments' section has a text area for summary comments. The 'Report Documents' section shows a table for saved documents with columns for Name, Description, Date Created, Updated By, Size, and Type. There are buttons for 'UPLOAD', 'DELETE DOCUMENT(S)', and 'SAVE DOCUMENT(S)'.

Final Comments (Optional)

Please enter any summary comments

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; xlsx; pptx

Name	Description	Date Created	Updated By	Size	Type
No items available					

UPLOAD

DELETE DOCUMENT(S) SAVE DOCUMENT(S)

Figure 20: Final Comments and Report Documents

1.15 Ambulatory Care – Emergency Department Visits (AMB) Path - 2

The screenshot shows the 'Ambulatory Care - Emergency Department Visits (AMB)' reporting page. The user has selected 'No' for 'Are you reporting on this measure?'. The reasons for not reporting are: 'Service not covered', 'Population not covered', and 'Data not available'. Under 'Portion of population not covered', 'Partial population not covered' is selected. The 'Explain why data not available' section includes 'Budget Constraints', 'Staff Constraints', and 'Data Inconsistencies/Accuracy'. The 'Reason' section for 'Data source not easily accessible' includes 'Requires medical record review' and 'Requires data linkage, which does not currently exist'.

Figure 21: AMB Reporting – No

This screenshot shows a different set of reasons for not reporting. The 'Data Inconsistencies/Accuracy' section is expanded, showing 'Requires data linkage, which does not currently exist' and 'Other'. The 'Information not collected' section is also expanded, showing 'Not collected by provider (hospital/health plan)' and 'Other'. Other reasons include 'Small sample size (less than 30)', 'Continuous enrollment requirement not met due to start date of SPA', and 'Other'. There is a field to 'Enter specific sample size' and a text area to 'Explain other reason why data not reported'.

Figure 22: AMB Reporting – No

Appendix A: Acronyms

Table 1: Acronyms

Acronym	Literal Translation
HHQM	Health Homes Quality Measure
AMB	Ambulatory Care – Emergency Department Visits
PRA	Paper Reduction Act of 1995



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

Medicaid and CHIP Program (MACPro)

HHQM-CBP PRA document

Version 1.0

08/22/2017

Document Number: 177-QSSI-MACPro-PRA-HHQM-CBP-D

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

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Figure 13: Deviations from Measure Specifications 2 9

Figure 14: Deviations from Measure Specifications 3 10

Figure 15: Optional Measure Stratification 1 10

Figure 16: Optional Measure Stratification 2 11

Figure 17: Optional Measure Stratification 3 11

Figure 18: Optional Measure Stratification 4 12

Figure 19: Optional Measure Stratification 5 12

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1. Health Homes Quality Measures

1.1 Controlling High Blood Pressure (CBP) - Path 1

Figure 1: CBP Reporting - Yes

1.2 Measurement Specification – Path 1

Figure 2: Measurement Specification 1

1.3 Measurement Specification – Path 2

News Tasks (4) **Records** Reports Actions Appian

Yes
 No

Measurement Specification +/-

National Committee for Quality Assurance (NCQA)/Healthcare Effectiveness Data and Information Set (HEDIS)
 Other

Explain *

Data Source +/-

Administrative Data
 Hybrid (Administrative and Medical Records Data)
 Other

Date Range +/-

Please define the date range for the reporting period based on the "From" time period as the month and year that corresponds to the beginning period in which utilization took place and please report the "To" time period as the month and year that corresponds to the end period in which utilization took place. Do not report the year in which data were collected from the measure, or the version of HEDIS® used to calculate the measure, both of which may be different from the period corresponding to the utilization of services.

Start Date

Figure 3: Measurement Specification 1

1.4 Date Range

News Tasks (4) **Records** Reports Actions Appian

Administrative Data
 Hybrid (Administrative and Medical Records Data)
 Other

Date Range +/-

Please define the date range for the reporting period based on the "From" time period as the month and year that corresponds to the beginning period in which utilization took place and please report the "To" time period as the month and year that corresponds to the end period in which utilization took place. Do not report the year in which data were collected from the measure, or the version of HEDIS® used to calculate the measure, both of which may be different from the period corresponding to the utilization of services.

Start Date

September 2002
 Month Year

End Date

October 2009
 Month Year

Definition of Population Included in the Measure +/-

Definition of Denominator

Select all that apply.

Figure 4: Date Range

1.5 Definition of Population Included in the Measure

The screenshot shows a web application interface with a dark blue header containing navigation links: 'News', 'Tasks (5)', 'Records', 'Reports', and 'Actions'. A user profile icon for 'Applan' is in the top right. The main content area is titled 'Definition of Population Included in the Measure' and contains the following sections:

- End Date:** Two dropdown menus for 'Month' and 'Year'.
- Definition of Denominator:** A section with the instruction 'Select all that apply'. It includes three checked checkboxes: 'Denominator includes Medicaid population', 'Denominator includes Medicare and Medicaid Dually-Eligible population', and 'Other'.
- Specify *:** A large text input field.
- Does this denominator represent your total measure eligible population as defined by the Technical Specifications for this measure?:** Radio buttons for 'Yes' and 'No' (selected).
- What is the sample size? *:** A text input field.
- What is the measure-eligible population? *:** A text input field.
- Which delivery systems are represented in the Denominator?:** A section with a red warning box stating 'User must select at least one of the following'. Below it are several unchecked checkboxes: 'Fees-for-Service (FFS)', 'Primary Care Case Management (PCCM)', 'Managed Care Organization / Pre-paid Inpatient Health Plan (MCO/PIHP)', 'Integrated Care Models (ICM)', and 'Other'.

Figure 5: Denominator Representation 1

1.6 Selection of Delivery Systems

News Tasks (5) **Records** Reports Actions Applan

Yes
 No

What is the sample size? *

What is the measure-eligible population? *

Which delivery systems are represented in the Denominator?
 Select all delivery systems that cover the measure-eligible population in your state. For each delivery system selected, report the percentage of the measure-eligible population that is represented in the data reported for the measure and the number of the health plans included (where applicable).

Fees-for-Service (FFS) Percentage of measure-eligible state population represented in data reported *

Primary Care Case Management (PCCM) Percentage of measure-eligible state population represented in data reported *

Managed Care Organization / Pre-paid Inpatient Health Plan (MCO/PIHP) Number of Health Plans *

Integrated Care Models (ICM) Percentage of measure-eligible state population represented in data reported *

Other Percentage of measure-eligible state population represented in data reported *

Describe *

Percentage of measure-eligible state population represented in data reported *

If applicable, list the number of Health Plans represented

Are all Health Home Providers represented in the denominator? *

Yes
 No

Figure 6: Denominator Representation 2

1.7 Health Home Providers Representation

News Tasks (5) **Records** Reports Actions Applan

If applicable, list the number of Health Plans represented

Are all Health Home Providers represented in the denominator? *

Yes
 No

Performance Measure +/-

The percentage of Health Home enrollees ages 18 to 74 who had an outpatient visit and whose body mass index (BMI) was documented during the measurement year or the year prior to the measurement year.

Age Range: 18-64

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

Character count: 0/2000

Age Range: 65-74

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

Figure 7: Denominator Representation 3

1.8 Performance Measure (Checked all age range) Path -1

Performance Measure

The percentage of Health Home enrollees ages 18 to 74 who had an outpatient visit and whose body mass index (BMI) was documented during the measurement year or the year prior to the measurement year.

Age Range: 18-64

Numerator	Denominator	Rate
0	0	0

Age Range: 65-74

Numerator	Denominator	Rate
0	0	0

Age Range: Total

Numerator	Denominator	Rate
0	0	0

Additional Notes/Comments on Measure

Character count: 0/2000

Deviations from Measure Specifications

Figure 8: Performance Measure 1

1.9 Performance Measure (Checked one age range) Path – 2 (Option Yes)

Performance Measure

Percentage of Health Home enrollees 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 following criteria:

- Health Home enrollees ages 18 to 59 whose BP was <140/90 mm Hg.
- Health Home enrollees ages 60 to 85 with a diagnosis of diabetes whose BP was <140/90 mm Hg.
- Health Home enrollees ages 60 to 85 without a diagnosis of diabetes whose BP was <150/90 mm Hg.

Age Range: 18-64

Numerator	Denominator	Rate
0	0	0

Age Range: 65-85

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

Character count: 0/2000

The option "Denominator includes Medicare and Medicaid Dually-Eligible population" was selected in the "Definition of Population Included in the Measure" section; however, no data were reported for the population age 65 and older. Are data available for population age 65 and over? *

Yes

No

Please either:

- enter a N/D/R for this age group.
- return to the "Definition of Population Included in the Measure" section and de-select the option "Denominator includes Medicare and Medicaid Dually-Eligible population"; or
- explain below why data were not reported for age 65 and older (for example if the 65 and older group were combined with the 18-64 age group).

"Denominator includes Medicare and Medicaid Dually-Eligible population" was selected, but a numerator, denominator, and rate were not reported for the 65 and older population. Please explain why *

Age Range: Total

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

Figure 9: Performance Measure 2

1.10 Performance Measure (Checked one age range) Path – 2 (Option No)

Performance Measure

Percentage of Health Home enrollees 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 following criteria:

- Health Home enrollees ages 18 to 59 whose BP was <140/90 mm Hg.
- Health Home enrollees ages 60 to 85 with a diagnosis of diabetes whose BP was <140/90 mm Hg.
- Health Home enrollees ages 60 to 85 without a diagnosis of diabetes whose BP was <150/90 mm Hg.

Age Range: 18-64

Numerator	Denominator	Rate
0	0	0

Age Range: 65-85

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

Character count: 0/2000

The option "Denominator includes Medicare and Medicaid Dually-Eligible population" was selected in the "Definition of Population included in the Measure" section; however, no data were reported for the population age 65 and older. Are data available for population age 65 and over? *

Yes

No

If applicable, please return to the "Definition of Population Included in the Measure" section and de-select the option "Denominator includes Medicare and Medicaid Dually-Eligible population" or provide explanation below.

"Denominator includes Medicare and Medicaid Dually-Eligible population" was not de-selected, please explain why *

Age Range: Total

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

Figure 10: Performance Measure 3

1.11 Other Performance Measure

Other Performance Measure

Please describe the other methodology used *

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

Numerator	Denominator	Rate
0	0	0

Clear Row

+ Additional/Other Rate(s)

Additional Notes/Comments on Measure

Combined Rate(s) from Multiple Reporting Units

Did you Combine Rates from Multiple Reporting Units (e.g., Health Home Providers) to Create a Health Home State-Level Rate? *

Yes

No

Optional Measure Stratification

If this measure is also reported by additional classifications/sub-categories, e.g. racial, ethnic, sex, language, disability status, or geography, complete the following as applicable.

Check all that apply

- Race (Non-Hispanic)
- Ethnicity
- Sex
- Primary Spoken Language
- Disability Status

Figure 11: Other Performance Measure

1.12 Deviations from Measure Specifications

The screenshot shows a web interface with a dark blue header containing navigation links: News, Tasks (5), Records (highlighted), Reports, and Actions. A user profile icon and the name 'Appian' are in the top right. The main content area is titled 'Deviations from Measure Specifications' and includes a question: 'Did your calculation of the measure deviate from the measure specification in any way? *'. Below this are radio buttons for 'Yes' (selected) and 'No'. A section titled 'Please select and explain the deviation(s)' follows. Under 'Age Range: 18-64', there are three checked checkboxes: 'Numerator', 'Denominator', and 'Other'. Each checked option has a corresponding 'Explain *' label and a large text input field. A '+/-' symbol is visible in the top right of the form area. At the bottom left, 'Age Range: 65-74' is partially visible.

Figure 12: Deviations from Measure Specifications 1

This screenshot shows the same web interface as Figure 12, but for the 'Age Range: 65-74' section. The 'Age Range: 18-64' section is no longer visible. Under 'Age Range: 65-74', the 'Numerator', 'Denominator', and 'Other' checkboxes are all checked. Each checked option is followed by an 'Explain *' label and a large text input field. The 'Age Range: Total' section is partially visible at the bottom left, with the 'Numerator' checkbox checked. The header and navigation elements are identical to the previous screenshot.

Figure 13: Deviations from Measure Specifications 2

News Tasks (5) **Records** Reports Actions Appian

Age Range: Total
 Numerator
 Denominator
 Other

Combined Rate(s) from Multiple Reporting Units

Did you Combine Rates from Multiple Reporting Units (e.g., Health Home Providers) to Create a Health Home 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

Explain *
 Explain *
 Explain *

Figure 14: Deviations from Measure Specifications 3

1.13 Optional Measure Stratification

News Tasks (5) **Records** Reports Actions Appian

The rates are not weighted

Optional Measure Stratification

If this measure is also reported by additional classifications/sub-categories, e.g. racial, ethnic, sex, language, disability status, or geography, complete the following as applicable.

Check all that apply

Race (Non-Hispanic)
 White

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65-85	0	0	0	Clear Row

+ Additional/Alternative Classification/Sub-category

Black or African American

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65-85	0	0	0	Clear Row

Figure 15: Optional Measure Stratification 1

News Tasks (5) Records Reports Actions					Applan
Age Range: 65-74	0	0	0	Clear Row	
+ Additional/Alternative Classification/Sub-category					
<input checked="" type="checkbox"/> American Indian or Alaska Native					
Classification/Sub-category	Numerator	Denominator	Rate		
Age Range: 18-64	0	0	0	Clear Row	
Age Range: 65-74	0	0	0	Clear Row	
+ Additional/Alternative Classification/Sub-category					
<input checked="" type="checkbox"/> Asian					
Classification/Sub-category	Numerator	Denominator	Rate		
Age Range: 18-64	0	0	0	Clear Row	
Age Range: 65-74	0	0	0	Clear Row	
+ Additional/Alternative Classification/Sub-category					
<input checked="" type="checkbox"/> Native Hawaiian or Other Pacific Islander					
Classification/Sub-category	Numerator	Denominator	Rate		
Age Range: 18-64	0	0	0	Clear Row	

Figure 16: Optional Measure Stratification 2

News Tasks (5) Records Reports Actions					Applan
<input checked="" type="checkbox"/> Native Hawaiian or Other Pacific Islander					
Classification/Sub-category	Numerator	Denominator	Rate		
Age Range: 18-64	0	0	0	Clear Row	
Age Range: 65-74	0	0	0	Clear Row	
+ Additional/Alternative Classification/Sub-category					
+ Additional Race(s)					
<input checked="" type="checkbox"/> Ethnicity					
<input checked="" type="checkbox"/> Hispanic or Latino					
Classification/Sub-category	Numerator	Denominator	Rate		
Age Range: 18-64	0	0	0	Clear Row	
Age Range: 65-74	0	0	0	Clear Row	
+ Additional/Alternative Classification/Sub-category					
<input checked="" type="checkbox"/> Not Hispanic or Latino					
Classification/Sub-category	Numerator	Denominator	Rate		
Age Range: 18-64	0	0	0	Clear Row	
Age Range: 65-74	0	0	0	Clear Row	

Figure 17: Optional Measure Stratification 3

News Tasks (5) **Records** Reports Actions Applan

Not Hispanic or Latino + Additional/Alternative Classification/Sub-category

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65-74	0	0	0	Clear Row

+ Additional/Alternative Classification/Sub-category

Sex + Additional Ethnicity(ies)

Male

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65-74	0	0	0	Clear Row

+ Additional/Alternative Classification/Sub-category

Female

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 18-64	0	0	0	Clear Row

Figure 18: Optional Measure Stratification 4

News Tasks (5) **Records** Reports Actions Applan

+ Additional/Alternative Classification/Sub-category

Female

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65-74	0	0	0	Clear Row

+ Additional/Alternative Classification/Sub-category

Primary Spoken Language

English

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65-74	0	0	0	Clear Row

+ Additional/Alternative Classification/Sub-category

Spanish

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65-74	0	0	0	Clear Row

Figure 19: Optional Measure Stratification 5

News Tasks (5) **Records** Reports Actions Applan

Age range: 65-74 0 0 0 Row

+ Additional Primary Spoken Language(s)

Disability Status

SSI

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65-74	0	0	0	Clear Row

+ Additional/Alternative Classification/Sub-category

Non-SSI

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65-74	0	0	0	Clear Row

+ Additional/Alternative Classification/Sub-category

+ Additional Disability Status(es)

Geography

Urban

Figure 20: Optional Measure Stratification 6

News Tasks (5) **Records** Reports Actions Applan

+ Additional Disability Status(es)

Geography

Urban

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65-74	0	0	0	Clear Row

+ Additional/Alternative Classification/Sub-category

Rural

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65-74	0	0	0	Clear Row

+ Additional/Alternative Classification/Sub-category

+ Additional Geographies

Final Comments (Optional) +/-

Please enter any summary comments

Figure 21: Optional Measure Stratification 7

1.14 Final Comments and Report Documents

News Tasks (4) **Records** Reports Actions

Geography

Final Comments (Optional)

Please enter any summary comments

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; xlsx; pptx

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

UPLOAD

DELETE DOCUMENT(S) SAVE DOCUMENT(S)

Figure 22: Final Comments and Report Documents

1.15 Controlling High Blood Pressure (CBP) – Path 2

News Tasks (5) **Records** Reports Actions

Controlling High Blood Pressure (CBP)

CMS-10434 OMB 0938-1188

Health Homes Quality Measure - NV - 2016

Request System Help

REQUEST TECHNICAL ASSISTANCE CLEAR VIEW ALL RESPONSES

View Implementation Guide

Are you reporting on this measure? *

Yes

No

Please explain why you are not reporting on the measure

Select all that apply (must select at least one)

Service not covered

Population not covered

Data not available

Portion of population not covered *

Entire population not covered

Partial population not covered

*** Explain the partial population not covered**

Explain why data not available

Select all that apply (must select at least one)

Figure 23: CBP Reporting – No - 1

News Tasks (5) **Records** Reports Actions

Appian

Data not available

Explain why data not available
Select all that apply (must select at least one)

Budget Constraints
 Staff Constraints
 Data Inconsistencies/Accuracy

* Please explain

Data not submitted by Providers to State
 Data source not easily accessible

Reason *Select all that apply*

Requires medical record review
 Requires data linkage, which does not currently exist
 Other

* Please explain

Information not collected

Reason *Select all that apply*

Figure 24: CBP Reporting – No - 2

News Tasks (5) **Records** Reports Actions

Appian

Information not collected

Reason *Select all that apply*

Not collected by provider (hospital/health plan)
 Other

* Please explain

Other

* Please explain

Small sample size (less than 30)

Continuous enrollment requirement not met due to start date of SPA
 Other

Enter specific sample size*

Explain other reason why data not reported*

Figure 25: CBP Reporting – No – 3

Appendix A: Acronyms

Table 1: Acronyms

Acronym	Literal Translation
HHQM	Health Homes Quality Measure
CBP	Controlling High Blood Pressure
PRA	Paper Reduction Act of 1995



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

Medicaid and CHIP Program (MACPro)

HHQM-CDF PRA document

Version 1.0

08/22/2017

Document Number: 169-QSSI-MACPro-PRA-HHQM-CDF-D

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

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1. Health Homes Quality Measure

1.1 Screening for Clinical Depression and Follow-Up Plan (CDF) – Path 1

News Tasks (4) **Records** Reports Actions Applan

Screening for Clinical Depression and Follow-Up Plan (CDF)
CMS-10434 OMB 0938-1188

Health Homes Quality Measure - NV - 2016

Request System Help
REQUEST TECHNICAL ASSISTANCE CLEAR VIEW ALL RESPONSES
View Implementation Guide

Are you reporting on this measure?*

Yes
 No

Measurement Specification

Centers for Medicare and Medicaid Services (CMS) +/-
 Other

Explain *

Data Source

Hybrid (Administrative and Medical Records Data) +/-
 Electronic Health Record (EHR) Data
 Other

Figure 1: CDF Reporting – Yes

1.2 Measurement Specification Path 1

News Tasks (4) **Records** Reports Actions Applan

REQUEST TECHNICAL ASSISTANCE CLEAR VIEW ALL RESPONSES
View Implementation Guide

Are you reporting on this measure?*

Yes
 No

Measurement Specification

Centers for Medicare and Medicaid Services (CMS) +/-
 Other

Data Source

Hybrid (Administrative and Medical Records Data) +/-
 Electronic Health Record (EHR) Data
 Other

Date Range

+/-

Please define the date range for the reporting period based on the "From" time period as the month and year that corresponds to the beginning period in which utilization took place and please report the "To" time period as the month and year that corresponds to the end period in which utilization took place. Do not report the year in which data were collected from the measure, or the version of HEDIS® used to calculate the measure, both of which may be different from the period corresponding to the utilization of services.

Start Date

From: [] [] [] To: [] [] []

Figure 2: Measurement Specification 1

1.3 Measurement Specification Path 2

News Tasks (4) **Records** Reports Actions Appian

REQUEST TECHNICAL ASSISTANCE CLEAR VIEW ALL RESPONSES [View Implementation Guide](#)

Are you reporting on this measure? *

Yes
 No

Measurement Specification +/-

Centers for Medicare and Medicaid Services (CMS)
 Other

Explain *

Data Source +/-

Hybrid (Administrative and Medical Records Data)
 Electronic Health Record (EHR) Data
 Other

Date Range +/-

Please define the date range for the reporting period based on the "From" time period as the month and year that corresponds to the beginning period in which utilization took place

Figure 3: Measurement Specification 2

1.4 Date Range

News Tasks (4) **Records** Reports Actions Appian

Character count: 0/2000

Date Range +/-

Please define the date range for the reporting period based on the "From" time period as the month and year that corresponds to the beginning period in which utilization took place and please report the "To" time period as the month and year that corresponds to the end period in which utilization took place. Do not report the year in which data were collected from the measure, or the version of HEDIS® used to calculate the measure, both of which may be different from the period corresponding to the utilization of services.

Start Date

April 2003
Month Year

End Date

July 2008
Month Year

Definition of Population Included in the Measure +/-

Definition of Denominator
Select all that apply

Denominator includes Medicaid population
 Denominator includes Medicare and Medicaid Dually-Eligible population

Figure 4: Data Range

1.5 Definition of Population Included in the Measure

Figure 5: Definition of Population Included in the Measure 1

1.6 Sample Size and Measure-eligible population related to Data Source

Figure 6: Definition of Population Included in the Measure 2

1.7 Selection of Delivery Systems

Which delivery systems are represented in the Denominator?
 Select all delivery systems that cover the measure-eligible population in your state. For each delivery system selected, report the percentage of the measure-eligible population that is represented in the data reported for the measure and the number of the health plans included (where applicable).

- Fees-for-Service (FFS)
- Primary Care Case Management (PCCM)
- Managed Care Organization / Pre-paid Inpatient Health Plan (MCO/PIHP)
- Integrated Care Models (ICM)
- Other

Percentage of measure-eligible state population represented in data reported *

Percentage of measure-eligible state population represented in data reported *

Number of Health Plans *

Percentage of measure-eligible state population represented in data reported *

Percentage of measure-eligible state population represented in data reported *

Describe *

Percentage of measure-eligible state population represented in data reported *

If applicable, list the number of Health Plans represented

Figure 7: Definition of Population Included in the Measure 3

1.8 Health Home Providers

Are all Health Home Providers represented in the denominator? *

Yes

No

Other Performance Measure

Please describe the other methodology used *

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

Clear Row

+ Additional/Other Rate(s)

Additional Notes/Comments on Measure

Figure 8: Definition of Population Included in the Measure 4

1.9 Performance Measure with all Age Range

The screenshot shows the 'Performance Measure' configuration interface. At the top, there are navigation tabs: 'News', 'Tasks (4)', 'Records' (highlighted), 'Reports', and 'Actions'. A user profile icon for 'Appian' is in the top right. The main heading is 'Performance Measure' with a '+/-' icon. Below this is a descriptive text: 'Percentage of Health Home enrollees age 12 and older screened for clinical depression on the date of 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.' There are four checked checkboxes for age ranges: '12-17', '18-64', '65 and older', and 'Total'. Each checkbox is followed by a table with three columns: 'Numerator', 'Denominator', and 'Rate'. All 'Numerator' and 'Denominator' fields contain the value '0', and all 'Rate' fields are empty. At the bottom, there is a text area for 'Additional Notes/Comments on Measure'.

Figure 9: Performance Measure 1

1.10 Performance Measure with one Age Range

The screenshot shows the 'Performance Measure' configuration interface for a single age range. The navigation tabs are the same as in Figure 9. The 'Records' tab is selected. There are two unchecked checkboxes for age ranges: '12-17' and '65 and older'. The '12-17' checkbox is followed by a table with 'Numerator' (0), 'Denominator' (0), and an empty 'Rate' field. Below this is a text area with the prompt 'Please explain why data was not entered for this numerator/denominator/rate set *' and a character count of 0/2000. The '65 and older' checkbox is followed by a similar text area. At the bottom, there is a radio button selection for 'The option "Denominator includes Medicare and Medicaid Dually-Eligible population" was selected in the "Definition of Population included in the Measure" section; however, no data were reported for the population age 65 and older. Are data available for population age 65 and over? *'. The 'Yes' radio button is selected. To the right, under 'Please either:', there is a list of three instructions: 1. enter a N/D/R for this age group, 2. return to the "Definition of Population Included in the Measure" section and de-select the option "Denominator includes Medicare and Medicaid Dually-Eligible population", or 3. explain below why data were not reported for age 65 and older (for example if the 65 and older group were combined with the 18-64 age group).

Figure 10: Performance Measure 2

1.11 Age Range 65 and over Path – 1

Character count: 0/2000

The option "Denominator includes Medicare and Medicaid Dually-Eligible population" was selected in the "Definition of Population included in the Measure" section; however, no data were reported for the population age 65 and older. Are data available for population age 65 and over? *

Yes
 No

Please either:

1. enter a N/D/R for this age group.
2. return to the "Definition of Population Included in the Measure" section and de-select the option "Denominator includes Medicare and Medicaid Dually-Eligible population", or
3. explain below why data were not reported for age 65 and older (for example if the 65 and older group were combined with the 18-64 age group).

"Denominator includes Medicare and Medicaid Dually-Eligible population" was selected, but a numerator, denominator, and rate were not reported for the 65 and older population. Please explain why *

Age Range: Total

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

Character count: 0/2000

Additional Notes/Comments on Measure

Figure 11: Performance Measure 3

1.12 Age Range 65 and over Path – 2

Character count: 0/2000

The option "Denominator includes Medicare and Medicaid Dually-Eligible population" was selected in the "Definition of Population included in the Measure" section; however, no data were reported for the population age 65 and older. Are data available for population age 65 and over? *

Yes
 No

If applicable, please return to the "Definition of Population Included in the Measure" section and de-select the option "Denominator includes Medicare and Medicaid Dually-Eligible population" or provide explanation below.

"Denominator includes Medicare and Medicaid Dually-Eligible population" was not de-selected, please explain why *

Age Range: Total

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

Character count: 0/2000

Additional Notes/Comments on Measure

Deviations from Measure Specifications

Figure 12: Performance Measure 4

1.13 Other Performance Measure

News Tasks (4) **Records** Reports Actions Appian

Other Performance Measure

Please describe the other methodology used *

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

+ Additional/Other Rate(s)

Additional Notes/Comments on Measure

Combined Rate(s) from Multiple Reporting Units

Did you Combine Rates from Multiple Reporting Units (e.g., Health Home Providers) to Create a Health Home State-Level Rate? *

Yes

No

Figure 13: Other Performance Measure

1.14 Deviations from Measure Specifications

News Tasks (4) **Records** Reports Actions Appian

Deviations from Measure Specifications

Did your calculation of the measure deviate from the measure specification in any way? *

Yes

No

Please select and explain the deviation(s)

Age Range: 12-17

Numerator

Explain *

Denominator

Explain *

Other

Explain *

Figure 14: Deviations from Measure Specifications 1

The screenshot shows a web application interface with a dark blue header containing navigation tabs: 'News', 'Tasks (4)', 'Records' (highlighted), 'Reports', and 'Actions'. A user profile icon and the name 'Applan' are in the top right. The main content area is divided into two sections. The first section is titled 'Age Range: 18-64' and contains three rows of checkboxes: 'Numerator' (checked), 'Denominator' (checked), and 'Other' (checked). To the right of each checked item is a text box labeled 'Explain *'. The second section is titled 'Age Range: 65 and older' and contains two rows of checkboxes: 'Numerator' (checked) and 'Denominator' (checked), each followed by an 'Explain *' text box. A vertical scrollbar is visible on the right side of the page.

Figure 15: Deviations from Measure Specifications 2

The screenshot shows the same CMS XLC interface as Figure 15. The 'Records' tab is active. The main content area shows a section titled 'Age Range: Total' with three rows of checkboxes: 'Denominator' (checked), 'Other' (checked), and 'Numerator' (checked). Each checked item is followed by an 'Explain *' text box. Below this, there are two more rows of checkboxes: 'Denominator' (checked) and 'Other' (checked), each followed by an 'Explain *' text box. The interface elements, including the header and scrollbar, are consistent with the previous figure.

Figure 16: Deviations from Measure Specifications 3

1.15 Optional Measure Stratification

News Tasks (4) **Records** Reports Actions
Applan

Optional Measure Stratification +/-

If this measure is also reported by additional classifications/sub-categories, e.g. racial, ethnic, sex, language, disability status, or geography, complete the following as applicable.

Check all that apply

Race (Non-Hispanic)

White

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 12-17	10	10	10	Clear Row
Age Range: 18-64	0	0	10	Clear Row
Age Range: 65 and older	0	0	10	Clear Row

+ Additional/Alternative Classification/Sub-category

Black or African American

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 12-17	0	0	0	Clear Row
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65 and older	0	0	0	Clear Row

+ Additional/Alternative Classification/Sub-category

American Indian or Alaska Native

Asian

Native Hawaiian or Other Pacific Islander

+ Additional Race(s)

Ethnicity

Hispanic or Latino

Figure 17: Optional Measure Stratification 1

News Tasks (4) **Records** Reports Actions Applan

American Indian or Alaska Native

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 12-17	0	0	0	Clear Row
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65 and older	0	0	0	Clear Row

+ Additional/Alternative Classification/Sub-category

Asian

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 12-17	0	0	0	Clear Row
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65 and older	0	0	0	Clear Row

+ Additional/Alternative Classification/Sub-category

Native Hawaiian or Other Pacific Islander

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 12-17	0	0	0	Clear Row
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65 and older	0	0	0	Clear Row

+ Additional/Alternative Classification/Sub-category

+ Additional Race(s)

Ethnicity

Hispanic or Latino

Figure 18: Option Measure Stratification 2

News Tasks (4) **Records** Reports Actions Applan

+ Additional Race(s)

Ethnicity

Hispanic or Latino

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 12-17	0	0	1	Clear Row
Age Range: 18-64	0	0	1	Clear Row
Age Range: 65 and older	0	0	1	Clear Row

+ Additional/Alternative Classification/Sub-category

Not Hispanic or Latino

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 12-17	0	0	0	Clear Row
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65 and older	0	0	0	Clear Row

+ Additional/Alternative Classification/Sub-category

+ Additional Ethnicities)

Sex

Male

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 12-17	0	0	0	Clear Row
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65 and older	0	0	0	Clear Row

Figure 19: Option Measure Stratification 3

News Tasks (4) **Records** Reports Actions Applan

+ Additional Ethnicity(ies)

Sex

Male

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 12-17	0	0	0	Clear Row
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65 and older	0	0	0	Clear Row

+ Additional/Alternative Classification/Sub-category

Female

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 12-17	0	0	0	Clear Row
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65 and older	0	0	0	Clear Row

+ Additional/Alternative Classification/Sub-category

Primary Spoken Language

English

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 12-17	0	0	0	Clear Row
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65 and older	0	0	0	Clear Row

+ Additional/Alternative Classification/Sub-category

Figure 20: Optional Measure Stratification 4

News Tasks (4) **Records** Reports Actions Applan

Spanish

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 12-17	0	0	0	Clear Row
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65 and older	0	0	0	Clear Row

+ Additional/Alternative Classification/Sub-category

+ Additional Primary Spoken Language(s)

Disability Status

SSI

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 12-17	0	0	0	Clear Row
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65 and older	0	0	0	Clear Row

+ Additional/Alternative Classification/Sub-category

Non-SSI

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 12-17	0	0	0	Clear Row
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65 and older	0	0	0	Clear Row

+ Additional/Alternative Classification/Sub-category

+ Additional Disability Status(es)

Geozonhv

Figure 21: Optional Measure Stratification 5

The screenshot displays the 'Records' section of the CMS XLC interface. It features a navigation bar with 'News', 'Tasks (4)', 'Records', 'Reports', and 'Actions'. The user 'Appian' is logged in. The main content area is titled '+ Additional Disability Status(es)' and includes a 'Geography' filter with 'Urban' and 'Rural' options. Two tables are shown, one for 'Urban' and one for 'Rural'. Each table has columns for 'Classification/Sub-category', 'Numerator', 'Denominator', 'Rate', and 'Clear Row'. The 'Rate' column is highlighted with a red border. Below the tables, there is a section for 'Final Comments (Optional)' with a text input field and a 'Report Documents' link.

Figure 22: Optional Measure Stratification 6

1.16 Final Comments and Report Documents

The screenshot shows the 'Final Comments (Optional)' and 'Report Documents' sections of the CMS XLC interface. The 'Final Comments (Optional)' section has a text input field with the placeholder 'Please enter any summary comments'. Below it is the 'Report Documents' section, which includes a 'Saved Documents' list. The list has columns for 'Name', 'Description', 'Date Created', 'Updated By', 'Size', and 'Type'. Below the list is an 'UPLOAD' button and a 'No items available' message. At the bottom, there are 'DELETE DOCUMENT(S)' and 'SAVE DOCUMENT(S)' buttons, and a question: 'Would you like to validate the core measure data at this time?'.

Figure 23: Final Comments and Report Documents

1.17 Screen for Clinical Depression and Follow-up Plan (CDF) – Path 2

News Tasks (5) **Records** Reports Actions Appian

View Implementation Guide

Are you reporting on this measure? *

Yes

No

Please explain why you are not reporting on the measure

Select all that apply (must select at least one)

Service not covered

Population not covered

Data not available

Portion of population not covered *

Entire population not covered

Partial population not covered

*** Explain the partial population not covered**

Explain why data not available

Select all that apply (must select at least one)

Budget Constraints

Staff Constraints

Data Inconsistencies/Accuracy

*** Please explain**

Data not submitted by Providers to State

Data source not easily accessible

Figure 24: CDF Reporting – No -1

Data not submitted by Providers to State

Data source not easily accessible

Reason *Select all that apply*

Requires medical record review

Requires data linkage, which does not currently exist

Other

*** Please explain**

Information not collected

Reason *Select all that apply*

Not collected by provider (hospital/health plan)


Other

*** Please explain**

Other

*** Please explain**

Figure 25: CDF Reporting – No - 2

News Tasks (5) **Records** Reports Actions  Appian

Small sample size (less than 30)

Continuous enrollment requirement not met due to start date of SPA

Other

Other
* Please explain

Enter specific sample size *

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; xlsx; pptx

<input type="checkbox"/>	Name	Description	Date Created	Updated By	Size	Type
--------------------------	------	-------------	--------------	------------	------	------

Figure 26: CDF Reporting – No – 3

Appendix A: Acronyms

Table 1: Acronyms

Acronym	Literal Translation
HHQM	Health Homes Quality Measure
CDF	Screening for Clinical Depression and Follow-Up Plan
PRA	Paper Reduction Act of 1995



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

Medicaid and CHIP Program (MACPro)

HHQM-CTR PRA document

Version 1.0

08/22/2017

Document Number: 222-QSSI-MACPro-PRA-HHQM-CTR-D

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

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Table 1: Acronyms 16

1. Health Homes Quality Measures

1.1 Care Transition – Timely Transmission of Transition Record (CTR) - Path 1

News Tasks (5) **Records** Reports Actions Applan

Summary Report Data News **Related Actions**

Care Transition - Timely Transmission of Transition Record (CTR)

CMS-10434 OMB 0938-1188

Health Homes Quality Measure - NV - 2016 Request System Help

[REQUEST TECHNICAL ASSISTANCE](#) [CLEAR](#) [VIEW ALL RESPONSES](#) [View Implementation Guide](#)

Are you reporting on this measure? *

Yes
 No

Measurement Specification +/-

American Medical Association - Physician Consortium for Performance Improvement (AMA-PCPI)
 Other

Data Source +/-

Hybrid (Administrative and Medical Records Data)

From where is the Administrative Data coming?
Must select one or more

Medicaid Management Information System (MMIS)
 Other

From where is the Medical Records coming?
Must select only one

Electronic Health Record (EHR) Data
 Paper
 Both (EHR and Paper)

Other

Date Range +/-

Please define the date range for the reporting period based on the "From" time period as the month and year that corresponds to the beginning period in which utilization took place and please report the "To" time period as the month and year that corresponds to the end period in which utilization took place. Do not report the year in which data were collected from the measure, or the version of HEDIS® used to calculate the measure, both of which may be different from the period corresponding to the utilization of services.

Figure 1: CTR Reporting - Yes

1.2 Measurement Specification – Path 1

News Tasks (5) Records Reports Actions Applan

Are you reporting on this measure? *

Yes
 No

Measurement Specification +/-

American Medical Association - Physician Consortium for Performance Improvement (AMA-PCPI)
 Other

Data Source +/-

Hybrid (Administrative and Medical Records Data)

From where is the Administrative Data coming?
Must select one or more

Medicaid Management Information System (MMIS)
 Other

From where is the Medical Records coming?
Must select only one

Electronic Health Record (EHR) Data
 Paper
 Both (EHR and Paper)

Other

Date Range +/-

Please define the date range for the reporting period based on the "From" time period as the month and year that corresponds to the beginning period in which utilization took place and please report the "To" time period as the month and year that corresponds to the end period in which utilization took place. Do not report the year in which data were collected from the measure, or the version of HEDIS® used to calculate the measure, both of which may be different from the period corresponding to the utilization of services.

Start Date

Select Month Select Year
Month Year

End Date

Select Month Select Year
Month Year

Definition of Population Included in the Measure +/-

Definition of Denominator

Figure 2: Measurement Specification 1

1.3 Measurement Specification – Path 2

News Tasks (5) **Records** Reports Actions

 Applan
[View Implementation Guide](#)

Are you reporting on this measure? *

Yes
 No

Measurement Specification +/-

American Medical Association - Physician Consortium for Performance Improvement (AMA-PCPI)
 Other

Data Source +/-

Hybrid (Administrative and Medical Records Data)

Other

From where is the Administrative Data coming?
Must select one or more

Medicaid Management Information System (MMIS)
 Other

From where is the Medical Records coming?
Must select only one

Electronic Health Record (EHR) Data
 Paper
 Both (EHR and Paper)

Date Range +/-

Please define the date range for the reporting period based on the "From" time period as the month and year that corresponds to the beginning period in which utilization took place and please report the "To" time period as the month and year that corresponds to the end period in which utilization took place. Do not report the year in which data were collected from the measure, or the version of HEDIS® used to calculate the measure, both of which may be different from the period corresponding to the utilization of services.

Start Date

Month

Year

End Date

Month

Year

Figure 3: Measurement Specification 1

1.4 Date Range

News Tasks (5) **Records** Reports Actions Applan

From where is the medical records coming.
Must select only one
 Electronic Health Record (EHR) Data
 Paper
 Both (EHR and Paper)

Other

Date Range

Please define the date range for the reporting period based on the "From" time period as the month and year that corresponds to the beginning period in which utilization took place and please report the "To" time period as the month and year that corresponds to the end period in which utilization took place. Do not report the year in which data were collected from the measure, or the version of HEDIS® used to calculate the measure, both of which may be different from the period corresponding to the utilization of services.

Start Date

Select Month Select Year

Month Year

End Date

Select Month Select Year

Month Year

Definition of Population Included in the Measure

Definition of Denominator
Select all that apply

Denominator includes Medicaid population
 Denominator includes Medicare and Medicaid Dually-Eligible population
 Other

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?
Select all delivery systems that cover the measure-eligible population in your state. For each delivery system selected, report the percentage of the measure-eligible population that is represented in the data reported

Figure 4: Date Range

1.5 Definition of Population Included in the Measure

The screenshot shows a web application interface with a top navigation bar containing 'News', 'Tasks (5)', 'Records', 'Reports', and 'Actions'. A user profile icon for 'Applan' is in the top right. The main content area is titled 'Definition of Population Included in the Measure' and includes the following sections:

- End Date:** Two dropdown menus for 'Month' and 'Year'.
- Definition of Denominator:** A section with the instruction 'Select all that apply' and three checked checkboxes: 'Denominator includes Medicaid population', 'Denominator includes Medicare and Medicaid Dually-Eligible population', and 'Other'.
- Specify *:** A text input field.
- Does this denominator represent your total measure eligible population as defined by the Technical Specifications for this measure?:** Radio buttons for 'Yes' and 'No' (selected).
- What is the sample size? *:** A text input field.
- What is the measure-eligible population? *:** A text input field.
- Which delivery systems are represented in the Denominator?:** A section with a red warning box stating 'User must select at least one of the following' and a list of checkboxes: 'Fees-for-Service (FFS)', 'Primary Care Case Management (PCCM)', 'Managed Care Organization / Pre-paid Inpatient Health Plan (MCO/PIHP)', 'Integrated Care Models (ICM)', and 'Other'.

Figure 5: Denominator Representation 1

1.6 Selection of Delivery Systems

News Tasks (5) **Records** Reports Actions Appian

Yes
 No

What is the sample size? *

What is the measure-eligible population? *

Which delivery systems are represented in the Denominator?
 Select all delivery systems that cover the measure-eligible population in your state. For each delivery system selected, report the percentage of the measure-eligible population that is represented in the data reported for the measure and the number of the health plans included (where applicable).

Fees-for-Service (FFS) Percentage of measure-eligible state population represented in data reported *

Primary Care Case Management (PCCM) Percentage of measure-eligible state population represented in data reported *

Managed Care Organization / Pre-paid Inpatient Health Plan (MCO/PIHP) Number of Health Plans *

Integrated Care Models (ICM) Percentage of measure-eligible state population represented in data reported *

Other Percentage of measure-eligible state population represented in data reported *

Describe *

Percentage of measure-eligible state population represented in data reported *

If applicable, list the number of Health Plans represented

Are all Health Home Providers represented in the denominator? *

Yes
 No

Figure 6: Denominator Representation 2

1.7 Health Home Providers Representation

News Tasks (5) **Records** Reports Actions Appian

If applicable, list the number of Health Plans represented

Are all Health Home Providers represented in the denominator? *

Yes
 No

Performance Measure +/-

The percentage of Health Home enrollees ages 18 to 74 who had an outpatient visit and whose body mass index (BMI) was documented during the measurement year or the year prior to the measurement year.

Age Range: 18-64 Please explain why data was not entered for this numerator/denominator/rate set *

Character count: 0/2000

Age Range: 65-74 Please explain why data was not entered for this numerator/denominator/rate set *

Figure 7: Denominator Representation 3

1.8 Performance Measure (Checked all age range) Path -1

Performance Measure

The percentage of Health Home enrollees ages 18 to 74 who had an outpatient visit and whose body mass index (BMI) was documented during the measurement year or the year prior to the measurement year.

Age Range: 18-64

Numerator	Denominator	Rate
0	0	0

Age Range: 65-74

Numerator	Denominator	Rate
0	0	0

Age Range: Total

Numerator	Denominator	Rate
0	0	0

Additional Notes/Comments on Measure

Character count: 0/2000

Deviations from Measure Specifications

Figure 8: Performance Measure 1

1.9 Performance Measure (Checked one age range) Path – 2 (Option Yes)

Performance Measure

Percentage of Health Home enrollees 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 following criteria:

- Health Home enrollees ages 18 to 59 whose BP was <140/90 mm Hg.
- Health Home enrollees ages 60 to 85 with a diagnosis of diabetes whose BP was <140/90 mm Hg.
- Health Home enrollees ages 60 to 85 without a diagnosis of diabetes whose BP was <150/90 mm Hg.

Age Range: 18-64

Numerator	Denominator	Rate
0	0	0

Age Range: 65-85

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

Character count: 0/2000

The option "Denominator includes Medicare and Medicaid Dually-Eligible population" was selected in the "Definition of Population Included in the Measure" section; however, no data were reported for the population age 65 and older. Are data available for population age 65 and over? *

Yes

No

Please either:

- enter a N/D/R for this age group.
- return to the "Definition of Population Included in the Measure" section and de-select the option "Denominator includes Medicare and Medicaid Dually-Eligible population"; or
- explain below why data were not reported for age 65 and older (for example if the 65 and older group were combined with the 18-64 age group).

"Denominator includes Medicare and Medicaid Dually-Eligible population" was selected, but a numerator, denominator, and rate were not reported for the 65 and older population. Please explain why *

Age Range: Total

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

Figure 9: Performance Measure 2

1.10 Performance Measure (Checked one age range) Path – 2 (Option No)

Performance Measure

Percentage of Health Home enrollees 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 following criteria:

- Health Home enrollees ages 18 to 59 whose BP was <140/90 mm Hg.
- Health Home enrollees ages 60 to 85 with a diagnosis of diabetes whose BP was <140/90 mm Hg.
- Health Home enrollees ages 60 to 85 without a diagnosis of diabetes whose BP was <150/90 mm Hg.

Age Range: 18-64

Numerator	Denominator	Rate
0	0	0

Age Range: 65-85

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

Character count: 0/2000

The option "Denominator includes Medicare and Medicaid Dually-Eligible population" was selected in the "Definition of Population Included in the Measure" section; however, no data were reported for the population age 65 and older. Are data available for population age 65 and over? *

Yes
 No

If applicable, please return to the "Definition of Population Included in the Measure" section and de-select the option "Denominator includes Medicare and Medicaid Dually-Eligible population" or provide explanation below.

"Denominator includes Medicare and Medicaid Dually-Eligible population" was not de-selected, please explain why *

Age Range: Total

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

Figure 10: Performance Measure 3

1.11 Other Performance Measure

Other Performance Measure

Please describe the other methodology used *

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

+ Additional/Other Rate(s)

Additional Notes/Comments on Measure

Combined Rate(s) from Multiple Reporting Units

Did you Combine Rates from Multiple Reporting Units (e.g., Health Home Providers) to Create a Health Home State-Level Rate? *

Yes
 No

Optional Measure Stratification

If this measure is also reported by additional classifications/sub-categories, e.g. racial, ethnic, sex, language, disability status, or geography, complete the following as applicable.

Check all that apply

- Race (Non-Hispanic)
- Ethnicity
- Sex
- Primary Spoken Language
- Disability Status

Figure 11: Other Performance Measure

1.12 Deviations from Measure Specifications

The screenshot shows a web interface with a dark blue header containing navigation links: 'News', 'Tasks (5)', 'Records' (highlighted), 'Reports', and 'Actions'. On the right of the header is a user profile icon and the name 'Appian'. Below the header, the page title 'Deviations from Measure Specifications' is displayed. The main content area contains a form with the following elements:

- A question: 'Did your calculation of the measure deviate from the measure specification in any way? *' with radio button options for 'Yes' (selected) and 'No'.
- A prompt: 'Please select and explain the deviation(s)'.
- A section for 'Age Range: 18-64' with three checked checkboxes: 'Numerator', 'Denominator', and 'Other'. Each checkbox is followed by an 'Explain *' label and a large text input field.
- A section for 'Age Range: 65-74' is partially visible at the bottom.

Figure 12: Deviations from Measure Specifications 1

This screenshot shows the lower portion of the form from Figure 12. It includes:

- The 'Age Range: 65-74' section with checked checkboxes for 'Numerator', 'Denominator', and 'Other', each with an associated 'Explain *' label and text input field.
- The 'Age Range: Total' section with a checked checkbox for 'Numerator' and an 'Explain *' label with a text input field.

Figure 13: Deviations from Measure Specifications 2

News Tasks (5) **Records** Reports Actions Appian

Age Range: Total

Numerator

Denominator

Other

Explain *

Explain *

Explain *

Combined Rate(s) from Multiple Reporting Units

Did you Combine Rates from Multiple Reporting Units (e.g., Health Home Providers) to Create a Health Home 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

Figure 14: Deviations from Measure Specifications 3

1.13 Optional Measure Stratification

News Tasks (5) **Records** Reports Actions Appian

The rates are not weighted

Optional Measure Stratification

If this measure is also reported by additional classifications/sub-categories, e.g. racial, ethnic, sex, language, disability status, or geography, complete the following as applicable.

Check all that apply

Race (Non-Hispanic)

White

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65-85	0	0	0	Clear Row

+ Additional/Alternative Classification/Sub-category

Black or African American

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65-85	0	0	0	Clear Row

Figure 15: Optional Measure Stratification 1

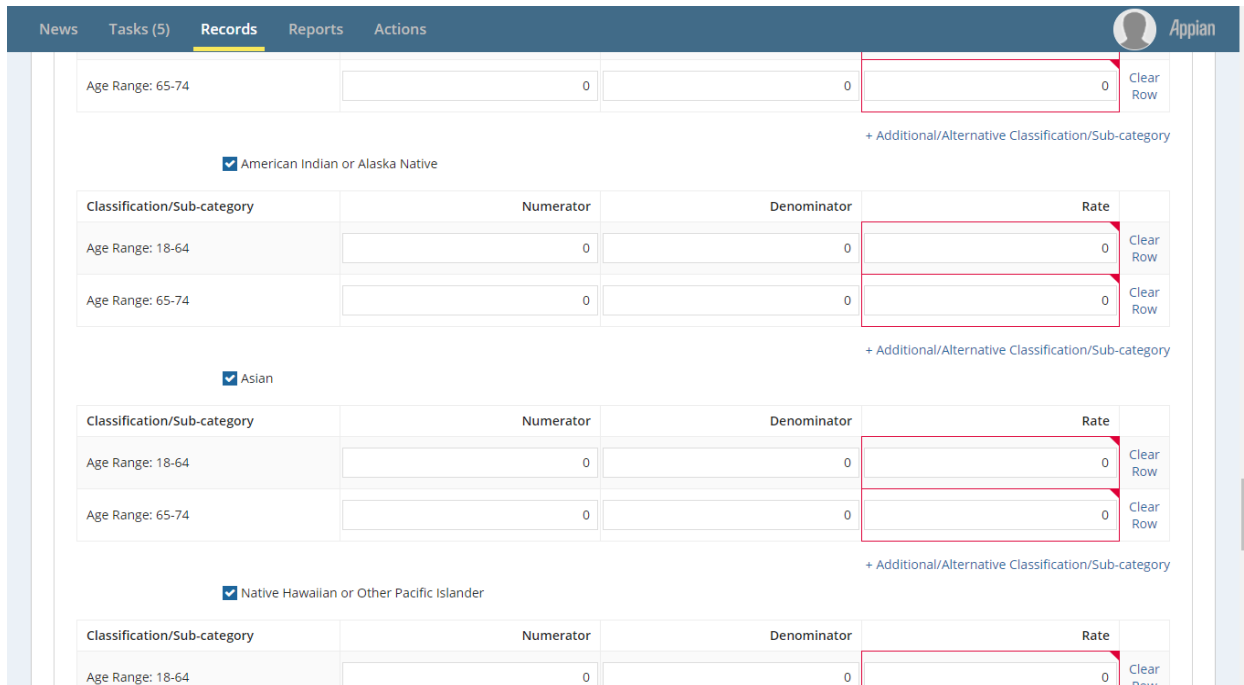


Figure 16: Optional Measure Stratification 2

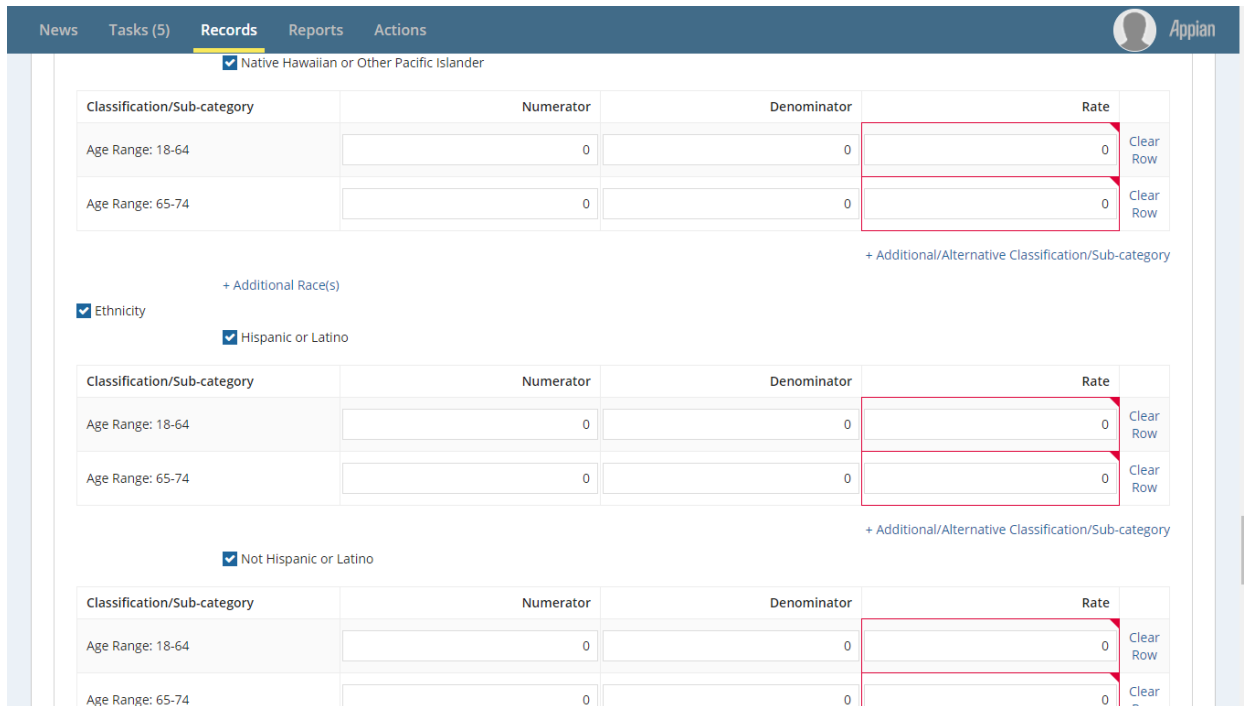


Figure 17: Optional Measure Stratification 3

News Tasks (5) **Records** Reports Actions Applan

Not Hispanic or Latino + Additional/Alternative Classification/Sub-category

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65-74	0	0	0	Clear Row

+ Additional/Alternative Classification/Sub-category

Sex + Additional Ethnicity(ies)

Male

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65-74	0	0	0	Clear Row

+ Additional/Alternative Classification/Sub-category

Female

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 18-64	0	0	0	Clear Row

Figure 18: Optional Measure Stratification 4

News Tasks (5) **Records** Reports Actions Applan

+ Additional/Alternative Classification/Sub-category

Female

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65-74	0	0	0	Clear Row

+ Additional/Alternative Classification/Sub-category

Primary Spoken Language

English

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65-74	0	0	0	Clear Row

+ Additional/Alternative Classification/Sub-category

Spanish

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65-74	0	0	0	Clear Row

Figure 19: Optional Measure Stratification 5

The screenshot shows the 'Records' tab in the CMS XLC interface. It displays two tables for stratification based on Disability Status and Geography. The top table is for SSI, and the bottom table is for Non-SSI. Both tables have columns for Classification/Sub-category, Numerator, Denominator, and Rate. The 'Rate' column contains a '0' and a 'Clear Row' button. The 'Geography' section is set to 'Urban'.

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65-74	0	0	0	Clear Row

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65-74	0	0	0	Clear Row

Figure 20: Optional Measure Stratification 6

The screenshot shows the 'Records' tab in the CMS XLC interface. It displays two tables for stratification based on Geography (Urban and Rural). The top table is for Urban, and the bottom table is for Rural. Both tables have columns for Classification/Sub-category, Numerator, Denominator, and Rate. The 'Rate' column contains a '0' and a 'Clear Row' button. Below the tables is a 'Final Comments (Optional)' section with a text input field and a '+'/- icon.

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65-74	0	0	0	Clear Row

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65-74	0	0	0	Clear Row

Final Comments (Optional)

Please enter any summary comments

Figure 21: Optional Measure Stratification 7

1.14 Final Comments and Report Documents

Figure 22: Final Comments and Report Documents

1.15 Care Transition – Timely Transmission of Transition Record (CTR) – Path 2

Figure 23: CTR Reporting – No - 1

The screenshot shows a web application interface with a top navigation bar containing 'News', 'Tasks (5)', 'Records' (highlighted), 'Reports', and 'Actions'. A user profile icon for 'Appian' is in the top right. The main content area is divided into two columns. The left column has a checkbox labeled 'Data not available' which is checked. The right column is titled 'Explain why data not available' and includes the instruction 'Select all that apply (must select at least one)'. It contains several checked checkboxes: 'Budget Constraints', 'Staff Constraints', 'Data Inconsistencies/Accuracy', 'Data not submitted by Providers to State', 'Data source not easily accessible', and 'Information not collected'. There are two text input fields labeled '* Please explain' corresponding to the first and second groups of checkboxes. A 'Reason' section is also present with checked options: 'Requires medical record review', 'Requires data linkage, which does not currently exist', and 'Other'. A third '* Please explain' field is associated with this section.

Figure 24: CTR Reporting – No - 2

The screenshot shows the same web application interface. The 'Records' tab is active. The left column has three checked checkboxes: 'Small sample size (less than 30)', 'Continuous enrollment requirement not met due to start date of SPA', and 'Other'. The right column is titled 'Explain why data not reported *'. It features a checked checkbox for 'Information not collected' with a 'Reason' section containing 'Not collected by provider (hospital/health plan)' and 'Other'. Below this is a '* Please explain' text field. Another checked checkbox for 'Other' is present with its own '* Please explain' text field. At the bottom, there is a text input field labeled 'Enter specific sample size *' and another text input field labeled 'Explain other reason why data not reported *'.

Figure 25: CTR Reporting – No - 3

Appendix A: Acronyms

Table 1: Acronyms

Acronym	Literal Translation
HHQM	Health Homes Quality Measure
CTR	Care Transition – Timely Transmission of Transition Record
PRA	Paper Reduction Act of 1995



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

Medicaid and CHIP Program (MACPro)

HHQM-FUH PRA document

Version 1.0

08/22/2017

Document Number: 174-QSSI-MACPro-PRA-HHQM-FUH-D

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

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1. Health Homes Quality Measures

1.1 Follow-Up After Hospitalization for Mental Illness (FUH) - Path 1

The screenshot shows the 'Follow-Up After Hospitalization for Mental Illness (FUH)' reporting page. The page title is 'Follow-Up After Hospitalization for Mental Illness (FUH)' with the identifier 'CMS-10434 OMB 0938-1188'. Below the title, it specifies 'Health Homes Quality Measure - NV - 2016'. There are navigation buttons: 'REQUEST TECHNICAL ASSISTANCE', 'CLEAR', and 'VIEW ALL RESPONSES'. A 'Request System Help' link is also present. The main question is 'Are you reporting on this measure?*' with 'Yes' selected. Below this, there are sections for 'Measurement Specification', 'Data Source', and 'Date Range', each with a collapse icon (+/-). The 'Measurement Specification' section shows 'National Committee for Quality Assurance (NCQA)/Healthcare Effectiveness Data and Information Set (HEDIS)' selected. The 'Data Source' section shows 'Administrative Data Only' selected. The 'Date Range' section is currently collapsed.

Figure 1: FUH Reporting - Yes

1.2 Measurement Specification – Path 1

This screenshot shows the 'Measurement Specification' section of the reporting interface. The 'Yes' radio button is selected. Under 'Measurement Specification', 'National Committee for Quality Assurance (NCQA)/Healthcare Effectiveness Data and Information Set (HEDIS)' is selected. A dropdown menu for 'Specify version of HEDIS used*' is open, showing 'Select Year' and 'HEDIS: Healthcare Effectiveness Data and Information Set'. Under 'Data Source', 'Administrative Data' is selected. The 'Date Range' section is expanded, showing a text box with instructions: 'Please define the date range for the reporting period based on the "From" time period as the month and year that corresponds to the beginning period in which utilization took place and please report the "To" time period as the month and year that corresponds to the end period in which utilization took place. Do not report the year in which data were collected from the measure, or the version of HEDIS® used to calculate the measure, both of which may be different from the period corresponding to the utilization of services.' Below this, there are dropdown menus for 'Start Date' with labels 'Month' and 'Year'.

Figure 2: Measurement Specification 1

1.3 Measurement Specification – Path 2

News Tasks (4) **Records** Reports Actions Appian

Yes
 No

Measurement Specification +/-

National Committee for Quality Assurance (NCQA)/Healthcare Effectiveness Data and Information Set (HEDIS)
 Other

Explain *

Data Source +/-

Administrative Data
 Hybrid (Administrative and Medical Records Data)
 Other

Date Range +/-

Please define the date range for the reporting period based on the "From" time period as the month and year that corresponds to the beginning period in which utilization took place and please report the "To" time period as the month and year that corresponds to the end period in which utilization took place. Do not report the year in which data were collected from the measure, or the version of HEDIS® used to calculate the measure, both of which may be different from the period corresponding to the utilization of services.

Start Date

Figure 3: Measurement Specification 2

1.4 Date Range

News Tasks (4) **Records** Reports Actions Appian

Administrative Data
 Hybrid (Administrative and Medical Records Data)
 Other

Date Range +/-

Please define the date range for the reporting period based on the "From" time period as the month and year that corresponds to the beginning period in which utilization took place and please report the "To" time period as the month and year that corresponds to the end period in which utilization took place. Do not report the year in which data were collected from the measure, or the version of HEDIS® used to calculate the measure, both of which may be different from the period corresponding to the utilization of services.

Start Date

September 2002
 Month Year

End Date

October 2009
 Month Year

Definition of Population Included in the Measure +/-

Definition of Denominator

Select all that apply.

Figure 4: Date Range

1.5 Definition of Population Included in the Measure

Month: _____ Year: _____

Definition of Population Included in the Measure

Definition of Denominator
Select all that apply

- Denominator includes Medicaid population
- Denominator includes Medicare and Medicaid Dually-Eligible population
- Other

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

Yes
 No

Which delivery systems are represented in the Denominator?
Select all delivery systems that cover the measure-eligible population in your state. For each delivery system selected, report the percentage of the measure-eligible population that is represented in the data reported for the measure and the number of the health plans included (where applicable).

User must select at least one of the following

- Fees-for-Service (FFS)
- Primary Care Case Management (PCCM)
- Managed Care Organization / Pre-paid Inpatient Health Plan (MCO/PIHP)

Specify *

Explain which populations are excluded and why *

Specify total measure-eligible population *

Figure 5: Denominator Representation 1

1.6 Selection of Delivery Systems

Specify total measure-eligible population *

Which delivery systems are represented in the Denominator?
Select all delivery systems that cover the measure-eligible population in your state. For each delivery system selected, report the percentage of the measure-eligible population that is represented in the data reported for the measure and the number of the health plans included (where applicable).

- Fees-for-Service (FFS)
- Primary Care Case Management (PCCM)
- Managed Care Organization / Pre-paid Inpatient Health Plan (MCO/PIHP)
- Integrated Care Models (ICM)
- Other

Percentage of measure-eligible state population represented in data reported *

Percentage of measure-eligible state population represented in data reported *

Number of Health Plans *

Percentage of measure-eligible state population represented in data reported *

Percentage of measure-eligible state population represented in data reported *

Describe *

Percentage of measure-eligible state population represented in data reported *

If applicable, list the number of Health Plans represented

Figure 6: Denominator Representation 2

1.7 Health Home Provider Representation

News Tasks (5) **Records** Reports Actions Appian

Are all Health Home Providers represented in the denominator?*

Yes

No

If applicable, list the number of Health Plans represented

Please explain *

Performance Measure +/-

The percentage of Health Home enrollees ages 18 to 74 who had an outpatient visit and whose body mass index (BMI) was documented during the measurement year or the year prior to the measurement year.

Age Range: 18-64

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

Character count: 0/2000

Age Range: 65-74

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

Figure 7: Denominator Representation 3

1.8 Performance Measure – Follow-up within 7 days of discharge (Checked all age range)

Performance Measure

Percentage of discharges for Health Home enrollees age 6 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:

- The percentage of discharges for which the enrollee received follow-up within 30 days of discharge.
- The percentage of discharges for which the enrollee received follow-up within 7 days of discharge.

Follow-Up within 7 days of discharge

Age Range: 6-17

Numerator	Denominator	Rate
0	0	0

Age Range: 18-64

Numerator	Denominator	Rate
0	0	0

Age Range: 65 and older

Numerator	Denominator	Rate
0	0	0

Age Range: Total

Numerator	Denominator	Rate
0	0	0

Follow-Up within 30 days of discharge

Age Range: 6-17

Numerator	Denominator	Rate
0	0	0

Age Range: 18-64

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

Figure 8: Performance Measure 1

1.9 Performance Measure – Follow-up within 30 days of discharge (checked all age range)

The screenshot shows a web interface for a performance measure. At the top, there are navigation tabs: News, Tasks (5), Records, Reports, and Actions. A user profile for 'Applan' is visible in the top right. The main content area displays a table with columns for Numerator, Denominator, and Rate. The data is organized into sections for different age ranges, each with a checked checkbox and a corresponding table row. All values in the Numerator, Denominator, and Rate columns are 0. Below the tables is a text area for 'Additional Notes/Comments on Measure' with a character count of 0/2000. At the bottom, there is a link for 'Deviations from Measure Specifications'.

	Numerator	Denominator	Rate
<input checked="" type="checkbox"/> Age Range: Total	0	0	0
<input checked="" type="checkbox"/> Age Range: 6-17	0	0	0
<input checked="" type="checkbox"/> Age Range: 18-64	0	0	0
<input checked="" type="checkbox"/> Age Range: 65 and older	0	0	0
<input checked="" type="checkbox"/> Age Range: Total	0	0	0

Additional Notes/Comments on Measure

Character count: 0/2000

[Deviations from Measure Specifications](#)

Figure 9: Performance Measure 2

1.10 Performance Measure – Follow-Up within 7 days of Discharge (checked one age range) Path 1

News Tasks (5) **Records** Reports Actions Applan

Follow-Up within 7 days of discharge

Age Range: 6-17

Numerator	Denominator	Rate
0	0	0

Age Range: 18-64
Please explain why data was not entered for this numerator/denominator/rate set *

Character count: 0/2000

Age Range: 65 and older
Please explain why data was not entered for this numerator/denominator/rate set *

Character count: 0/2000

The option "Denominator includes Medicare and Medicaid Dually-Eligible population" was selected in the "Definition of Population included in the Measure" section; however, no data were reported for the population age 65 and older. Are data available for population age 65 and over? *

Yes
 No

Please either:

1. enter a N/D/R for this age group.
2. return to the "Definition of Population included in the Measure" section and de-select the option "Denominator includes Medicare and Medicaid Dually-Eligible population"; or
3. explain below why data were not reported for age 65 and older (for example if the 65 and older group were combined with the 18-64 age group).

"Denominator includes Medicare and Medicaid Dually-Eligible population" was selected, but a numerator, denominator, and rate were not reported for the 65 and older population. Please explain why *

Age Range: Total
Please explain why data was not entered for this numerator/denominator/rate set *

Figure 10: Performance Measure 3

1.11 Performance Measure – Follow-Up within 7 days of Discharge (checked one age range) Path 2

Follow-Up within 7 days of discharge

Age Range: 6-17

Numerator	Denominator	Rate
0	0	0

Age Range: 18-64

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

Character count: 0/2000

Age Range: 65 and older

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

Character count: 0/2000

The option "Denominator includes Medicare and Medicaid Dually-Eligible population" was selected in the "Definition of Population Included in the Measure" section; however, no data were reported for the population age 65 and older. Are data available for population age 65 and over? *

Yes

No

If applicable, please return to the "Definition of Population Included in the Measure" section and de-select the option "Denominator includes Medicare and Medicaid Dually-Eligible population" or provide explanation below.

"Denominator includes Medicare and Medicaid Dually-Eligible population" was not de-selected, please explain why *


Age Range: Total

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

Figure 11: Performance Measure 4

1.12 Performance Measure – Follow-Up within 30 days of discharge (checked one age range) Path 1

News Tasks (5) **Records** Reports Actions

 Applan

Character count: 0/2000

Follow-Up within 30 days of discharge

Age Range: 6-17

Numerator	Denominator	Rate
0	0	0

Age Range: 18-64

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

Character count: 0/2000

Age Range: 65 and older

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

Character count: 0/2000

The option "Denominator includes Medicare and Medicaid Dually-Eligible population" was selected in the "Definition of Population included in the Measure" section; however, no data were reported for the population age 65 and older. Are data available for population age 65 and over? *

Yes
 No

Please either:

1. enter a N/D/R for this age group.
2. return to the "Definition of Population included in the Measure" section and de-select the option "Denominator includes Medicare and Medicaid Dually-Eligible population"; or
3. explain below why data were not reported for age 65 and older (for example if the 65 and older group were combined with the 18-64 age group).

"Denominator includes Medicare and Medicaid Dually-Eligible population" was selected, but a numerator, denominator, and rate were not reported for the 65 and older population. Please explain why *

Age Range: Total

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

Figure 12: Performance Measure 5

1.13 Performance Measure – Follow-Up within 30 days of discharge (Checked one age range) Path 2

News Tasks (5) **Records** Reports Actions Applan

Character count: 0/2000

Follow-Up within 30 days of discharge

Age Range: 6-17

Numerator	Denominator	Rate
0	0	0

Age Range: 18-64

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

Character count: 0/2000

Age Range: 65 and older

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

Character count: 0/2000

The option "Denominator includes Medicare and Medicaid Dually-Eligible population" was selected in the "Definition of Population included in the Measure" section; however, no data were reported for the population age 65 and older. Are data available for population age 65 and over? *

Yes

No

If applicable, please return to the "Definition of Population Included in the Measure" section and de-select the option "Denominator includes Medicare and Medicaid Dually-Eligible population" or provide explanation below.

"Denominator includes Medicare and Medicaid Dually-Eligible population" was not de-selected, please explain why *

Age Range: Total

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

Figure 13: Performance Measure 6

1.14 Other Performance Measure

News Tasks (5) **Records** Reports Actions

Applan

Other Performance Measure +/-

Please describe the other methodology used *

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

+ Additional/Other Rate(s)

Additional Notes/Comments on Measure

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

Did you Combine Rates from Multiple Reporting Units (e.g., Health Home Providers) to Create a Health Home State-Level Rate? *

Yes
 No

Optional Measure Stratification +/-

If this measure is also reported by additional classifications/sub-categories, e.g. racial, ethnic, sex, language, disability status, or geography, complete the following as applicable.

Check all that apply

- Race (Non-Hispanic)
- Ethnicity
- Sex
- Primary Spoken Language
- Disability Status
- Geography

Final Comments (Optional)

Figure 14: Other Performance Measure

1.15 Deviations from Measure Specifications – 30-Day Follow up

Character count: 0/2000

Deviations from Measure Specifications +/-

Did your calculation of the measure deviate from the measure specification in any way? *

Yes
 No

Please select and explain the deviation(s)

30-Day Follow up

Age Range: 6-17

Numerator Explain *

Denominator Explain *

Other Explain *

Age Range: 18-64

Numerator Explain *

Denominator Explain *

Figure 15: Deviations from Measure Specifications 1

The screenshot shows a web application interface with a top navigation bar containing 'News', 'Tasks (5)', 'Records', 'Reports', and 'Actions'. A user profile icon for 'Applan' is in the top right. The main content area is divided into two columns. The left column contains a list of records with checkboxes for 'Denominator', 'Other', and 'Age Range: 65 and older' (with a sub-check for 'Numerator'). The right column contains corresponding 'Explain *' text input fields for each record.

Figure 16: Deviations from Measure Specifications 2

The screenshot shows a similar web application interface. The left column contains a list of records with checkboxes for 'Age Range: 65 and older' (with a sub-check for 'Numerator'), 'Denominator', 'Other', 'Age Range: Total' (with a sub-check for 'Numerator'), 'Denominator', and 'Other'. The right column contains corresponding 'Explain *' text input fields for each record.

Figure 17: Deviations from Measure Specifications 3

1.16 Deviations from Measure Specifications – 7-Day Follow up

The screenshot shows a web application interface with a dark blue header containing navigation tabs: 'News', 'Tasks (5)', 'Records' (highlighted), 'Reports', and 'Actions'. A user profile icon for 'Applan' is in the top right. The main content area is titled '7-Day Follow up'. It features two sections for different age groups. The first section is for 'Age Range: 6-17' and the second for 'Age Range: 18-64'. Each section contains three checkboxes: 'Numerator', 'Denominator', and 'Other', all of which are checked. To the right of each checked checkbox is a large, empty text box labeled 'Explain *'. The interface is clean and uses a light blue and white color scheme.

Figure 18: Deviations from Measure Specifications 4

This screenshot shows a similar web application interface. The header is identical to Figure 18. The main content area is titled 'Deviations from Measure Specifications 5'. It features three sections for different age groups: 'Age Range: 65 and older', 'Age Range: Total', and another 'Age Range: Total'. Each section contains three checkboxes: 'Numerator', 'Denominator', and 'Other', all of which are checked. To the right of each checked checkbox is a large, empty text box labeled 'Explain *'. The layout and styling are consistent with the previous figure.

Figure 19: Deviations from Measure Specifications 5

1.17 Optional Measure Stratification

News Tasks (5) **Records** Reports Actions Appian

Optional Measure Stratification

If this measure is also reported by additional classifications/sub-categories, e.g. racial, ethnic, sex, language, disability status, or geography, complete the following as applicable.

Check all that apply

Race (Non-Hispanic)

White

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65-74	0	0	0	Clear Row

+ Additional/Alternative Classification/Sub-category

Black or African American

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65-74	0	0	0	Clear Row

+ Additional/Alternative Classification/Sub-category

American Indian or Alaska Native

Figure 20: Optional Measure Stratification 1

News Tasks (5) **Records** Reports Actions Appian

Age Range: 65-74	0	0	0	Clear Row
------------------	---	---	---	-----------

+ Additional/Alternative Classification/Sub-category

American Indian or Alaska Native

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65-74	0	0	0	Clear Row

+ Additional/Alternative Classification/Sub-category

Asian

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65-74	0	0	0	Clear Row

+ Additional/Alternative Classification/Sub-category

Native Hawaiian or Other Pacific Islander

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 18-64	0	0	0	Clear Row

Figure 21: Optional Measure Stratification 2

News Tasks (5) **Records** Reports Actions Applan

Native Hawaiian or Other Pacific Islander

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65-74	0	0	0	Clear Row

+ Additional/Alternative Classification/Sub-category

+ Additional Race(s)

Ethnicity

Hispanic or Latino

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65-74	0	0	0	Clear Row

+ Additional/Alternative Classification/Sub-category

Not Hispanic or Latino

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65-74	0	0	0	Clear Row

Figure 22: Optional Measure Stratification 3

News Tasks (5) **Records** Reports Actions Applan

+ Additional/Alternative Classification/Sub-category

Not Hispanic or Latino

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65-74	0	0	0	Clear Row

+ Additional/Alternative Classification/Sub-category

+ Additional Ethnicity(ies)

Sex

Male

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65-74	0	0	0	Clear Row

+ Additional/Alternative Classification/Sub-category

Female

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 18-64	0	0	0	Clear Row

Figure 23: Optional Measure Stratification 4

The screenshot shows three stratification sections. Each section has a table with the following structure:

Classification/Sub-category	Numerator	Denominator	Rate	Clear Row
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65-74	0	0	0	Clear Row

The sections are:

- Female**: Filtered for Female.
- Primary Spoken Language**: Filtered for English.
- Spanish**: Filtered for Spanish.

Figure 24: Optional Measure Stratification 5

The screenshot shows three stratification sections. Each section has a table with the following structure:

Classification/Sub-category	Numerator	Denominator	Rate	Clear Row
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65-74	0	0	0	Clear Row

The sections are:

- Disability Status**: Filtered for SSI and Non-SSI.
- Geography**: Filtered for Urban.

Figure 25: Optional Measure Stratification 6

+ Additional Disability Status(es)

Geography

Urban

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65-74	0	0	0	Clear Row

+ Additional/Alternative Classification/Sub-category

Rural

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65-74	0	0	0	Clear Row

+ Additional/Alternative Classification/Sub-category

+ Additional Geographies

Final Comments (Optional)

Please enter any summary comments

Figure 26: Optional Measure Stratification 7

1.18 Final Comments and Report Documents

Final Comments (Optional)

Please enter any summary comments

Report Documents

Saved Documents

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

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

UPLOAD

DELETE DOCUMENT(S) SAVE DOCUMENT(S)

Figure 27: Final Comments and Report Documents

1.19 Follow-Up After Hospitalization for Mental Illness (FUH) - Path 2

News Tasks (5) **Records** Reports Actions Appian

View Implementation Guide

Are you reporting on this measure? *

Yes

No

Please explain why you are not reporting on the measure

Select all that apply (must select at least one)

Service not covered

Population not covered

Data not available

Portion of population not covered *

Entire population not covered

Partial population not covered

* Explain the partial population not covered

Explain why data not available

Select all that apply (must select at least one)

Budget Constraints

Staff Constraints

Data Inconsistencies/Accuracy

* Please explain

Data not submitted by Providers to State

Data source not easily accessible

Figure 28: FUH Reporting – No - 1

Data not submitted by Providers to State

Data source not easily accessible

Reason *Select all that apply*

Requires medical record review

Requires data linkage, which does not currently exist

Other

* Please explain

Information not collected

Reason *Select all that apply*

Not collected by provider (hospital/health plan)

Other

* Please explain

Other

* Please explain

Figure 29: FUH Reporting – No - 2

News Tasks (5) **Records** Reports Actions Applan

Small sample size (less than 30)

Continuous enrollment requirement not met due to start date of SPA

Other

Other
* Please explain

Enter specific sample size *

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; xlsx; pptx

<input type="checkbox"/>	Name	Description	Date Created	Updated By	Size	Type
--------------------------	------	-------------	--------------	------------	------	------

Figure 30: FUH Reporting – No – 3

Appendix A: Acronyms

Table 1: Acronyms

Acronym	Literal Translation
HHQM	Health Homes Quality Measure
FUH	Follow-Up After Hospitalization for Mental Illness
PRA	Paper Reduction Act of 1995



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

Medicaid and CHIP Program (MACPro)

HHQM-IET PRA document

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Table 1: Acronyms 22

1. Health Homes Quality Measures

1.1 Initiation and Engagement of Alcohol and Other Drug Dependence Treatment (IET) - Path 1

Figure 1: IET Reporting - Yes

1.2 Measurement Specification – Path 1

Figure 2: Measurement Specification 1

1.3 Measurement Specification – Path 2

News Tasks (4) **Records** Reports Actions Appian

Yes
 No

Measurement Specification +/-

National Committee for Quality Assurance (NCQA)/Healthcare Effectiveness Data and Information Set (HEDIS)
 Other

Explain *

Data Source +/-

Administrative Data
 Hybrid (Administrative and Medical Records Data)
 Other

Date Range +/-

Please define the date range for the reporting period based on the "From" time period as the month and year that corresponds to the beginning period in which utilization took place and please report the "To" time period as the month and year that corresponds to the end period in which utilization took place. Do not report the year in which data were collected from the measure, or the version of HEDIS® used to calculate the measure, both of which may be different from the period corresponding to the utilization of services.

Start Date

Figure 3: Measurement Specification 1

1.4 Date Range

News Tasks (4) **Records** Reports Actions Appian

Administrative Data
 Hybrid (Administrative and Medical Records Data)
 Other

Date Range +/-

Please define the date range for the reporting period based on the "From" time period as the month and year that corresponds to the beginning period in which utilization took place and please report the "To" time period as the month and year that corresponds to the end period in which utilization took place. Do not report the year in which data were collected from the measure, or the version of HEDIS® used to calculate the measure, both of which may be different from the period corresponding to the utilization of services.

Start Date

September 2002
 Month Year

End Date

October 2009
 Month Year

Definition of Population Included in the Measure +/-

Definition of Denominator

Select all that apply.

Figure 4: Date Range

1.5 Definition of Population Included in the Measure

The screenshot shows a web interface for defining a population measure. At the top, there is a navigation bar with 'News', 'Tasks (6)', 'Records', 'Reports', and 'Actions'. A user profile for 'Applan' is visible in the top right. The main content area is titled 'Definition of Population Included in the Measure' and includes the following sections:

- Definition of Denominator:** A section with the instruction 'Select all that apply'. It contains three checked checkboxes: 'Denominator includes Medicaid population', 'Denominator includes Medicare and Medicaid Dually-Eligible population', and 'Other'.
- Does this denominator represent your total measure eligible population as defined by the Technical Specifications for this measure?:** A section with two radio buttons: 'Yes' (unselected) and 'No' (selected).
- Which delivery systems are represented in the Denominator?:** A section with the instruction 'Select all delivery systems that cover the measure-eligible population in your state. For each delivery system selected, report the percentage of the measure-eligible population that is represented in the data reported for the measure and the number of the health plans included (where applicable)'. A red warning box states 'User must select at least one of the following'. Below this are five unchecked checkboxes: 'Fees-for-Service (FFS)', 'Primary Care Case Management (PCCM)', 'Managed Care Organization / Pre-paid inpatient Health Plan (MCO/PIHP)', 'Integrated Care Models (ICM)', and 'Other'.
- Are all Health Home Providers represented in the denominator?***: A question at the bottom of the form.

Text input fields are provided for 'Specify *', 'Explain which populations are excluded and why *', and 'Specify total measure-eligible population *'.

Figure 5: Denominator Representation 1

1.6 Selection of Delivery Systems

News Tasks (5) **Records** Reports Actions Applan

Yes
 No

What is the sample size? *

What is the measure-eligible population? *

Which delivery systems are represented in the Denominator?
Select all delivery systems that cover the measure-eligible population in your state. For each delivery system selected, report the percentage of the measure-eligible population that is represented in the data reported for the measure and the number of the health plans included (where applicable).

- Fees-for-Service (FFS)
Percentage of measure-eligible state population represented in data reported *
- Primary Care Case Management (PCCM)
Percentage of measure-eligible state population represented in data reported *
- Managed Care Organization / Pre-paid Inpatient Health Plan (MCO/PIHP)
Number of Health Plans *
Percentage of measure-eligible state population represented in data reported *
- Integrated Care Models (ICM)
Percentage of measure-eligible state population represented in data reported *
- Other
Describe *
Percentage of measure-eligible state population represented in data reported *

Are all Health Home Providers represented in the denominator? *

Yes
 No

Figure 6: Denominator Representation 2

1.7 Health Home Providers Representation

News Tasks (6) **Records** Reports Actions

 Applan

Percentage of measure-eligible state population represented in data reported *

If applicable, list the number of Health Plans represented

Please explain *

Are all Health Home Providers represented in the denominator? *

Yes
 No

Performance Measure

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

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

Rate 1: Initiation of AOD Treatment

Age Range: 13-17

Numerator	Denominator	Rate
0	0	0

Age Range: 18-64

Numerator	Denominator	Rate
0	0	0

Age Range: 65 and older

Numerator	Denominator	Rate
0	0	0

Age Range: Total

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

Figure 7: Denominator Representation 3

1.8 Performance Measure (Checked all age range) Rate 1 - Path -1

Performance Measure

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

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

Rate 1: Initiation of AOD Treatment

Age Range: 13-17

Numerator	Denominator	Rate
0	0	0

Age Range: 18-64

Numerator	Denominator	Rate
0	0	0

Age Range: 65 and older

Numerator	Denominator	Rate
0	0	0

Age Range: Total

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

Character count: 0/2000

Rate 2: Engagement of AOD Treatment

Age Range: 13-17

Numerator	Denominator	Rate
0	0	0

Age Range: 18-64

Numerator	Denominator	Rate
0	0	0

Figure 8: Performance Measure 1

1.9 Performance Measure (Checked all age range) Rate 2 – Path – 2

News Tasks (6) **Records** Reports Actions Applan

Character count: 0/2000

Rate 2: Engagement of AOD Treatment

Age Range: 13-17

Numerator	Denominator	Rate
0	0	0

Age Range: 18-64

Numerator	Denominator	Rate
0	0	0

Age Range: 65 and older

Numerator	Denominator	Rate
0	0	0

Age Range: Total

Numerator	Denominator	Rate
0	0	0

Additional Notes/Comments on Measure

Character count: 0/2000

Deviations from Measure Specifications +/-

Did your calculation of the measure deviate from the measure specification in any way? *

Yes

No

[Combined Rate\(s\) from Multiple Reporting Units](#)

Figure 9: Performance Measure 2

1.10 Performance Measure (Checked one age range) Rate 1 - Path – 2 (Option Yes)

News Tasks (6) **Records** Reports Actions

 Applan

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

Rate 1: Initiation of AOD Treatment

Age Range: 13-17

Numerator	Denominator	Rate
0	0	0

Age Range: 18-64

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

Character count: 0/2000

Age Range: 65 and older

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

Character count: 0/2000

The option "Denominator includes Medicare and Medicaid Dually-Eligible population" was selected in the "Definition of Population Included in the Measure" section; however, no data were reported for the population age 65 and older. Are data available for population age 65 and over? *

Yes
 No

Please either:

1. enter a N/D/R for this age group.
2. return to the "Definition of Population Included in the Measure" section and de-select the option "Denominator includes Medicare and Medicaid Dually-Eligible population", or
3. explain below why data were not reported for age 65 and older (for example if the 65 and older group were combined with the 18-64 age group).

"Denominator includes Medicare and Medicaid Dually-Eligible population" was selected, but a numerator, denominator, and rate were not reported for the 65 and older population. Please explain why *

Age Range: Total

Figure 10: Performance Measure 3

1.11 Performance Measure (Checked one age range) Rate 1-Path – 2 (Option No)

News Tasks (5) **Records** Reports Actions

 Appian

Performance Measure

Percentage of Health Home enrollees 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 following criteria:

- Health Home enrollees ages 18 to 59 whose BP was <140/90 mm Hg.
- Health Home enrollees ages 60 to 85 with a diagnosis of diabetes whose BP was <140/90 mm Hg.
- Health Home enrollees ages 60 to 85 without a diagnosis of diabetes whose BP was <150/90 mm Hg.

Age Range: 18-64

Numerator	Denominator	Rate
0	0	0

Age Range: 65-85
Please explain why data was not entered for this numerator/denominator/rate set *

Character count: 0/2000

The option "Denominator includes Medicare and Medicaid Dually-Eligible population" was selected in the "Definition of Population included in the Measure" section; however, no data were reported for the population age 65 and older. Are data available for population age 65 and over? *

Yes
 No

If applicable, please return to the "Definition of Population Included in the Measure" section and de-select the option "Denominator includes Medicare and Medicaid Dually-Eligible population" or provide explanation below.

"Denominator includes Medicare and Medicaid Dually-Eligible population" was not de-selected, please explain why *

Age Range: Total
Please explain why data was not entered for this numerator/denominator/rate set *

Figure 11: Performance Measure 4

1.12 Performance Measure (Checked one age range) Rate 2 – Path – 2 (Option Yes)

News Tasks (6) Records Reports Actions
Applan

Rate 2: Engagement of AOD Treatment

Age Range: 13-17

Numerator	Denominator	Rate
0	0	0

Age Range: 18-64

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

Character count: 0/2000

Age Range: 65 and older

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

Character count: 0/2000

The option "Denominator includes Medicare and Medicaid Dually-Eligible population" was selected in the "Definition of Population Included in the Measure" section; however, no data were reported for the population age 65 and older. Are data available for population age 65 and over?*

Yes
 No

Please either:

1. enter a N/D/R for this age group.
2. return to the "Definition of Population Included in the Measure" section and de-select the option "Denominator includes Medicare and Medicaid Dually-Eligible population", or
3. explain below why data were not reported for age 65 and older (for example if the 65 and older group were combined with the 18-64 age group).

"Denominator includes Medicare and Medicaid Dually-Eligible population" was selected, but a numerator, denominator, and rate were not reported for the 65 and older population. Please explain why *


Age Range: Total

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

Figure 12: Performance Measure 5

1.13 Performance Measure (Checked one Age Rate) Rate 2 – Path – 2 (Option No)

News Tasks (6) **Records** Reports Actions

 Applan

Rate 2: Engagement of AOD Treatment

Age Range: 13-17

Numerator	Denominator	Rate
0	0	0

Age Range: 18-64

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

Character count: 0/2000

Age Range: 65 and older

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

Character count: 0/2000

The option "Denominator includes Medicare and Medicaid Dually-Eligible population" was selected in the "Definition of Population Included in the Measure" section; however, no data were reported for the population age 65 and older. Are data available for population age 65 and over?*

Yes
 No

If applicable, please return to the "Definition of Population Included in the Measure" section and de-select the option "Denominator includes Medicare and Medicaid Dually-Eligible population" or provide explanation below.
 "Denominator includes Medicare and Medicaid Dually-Eligible population" was not de-selected, please explain why *

Age Range: Total

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

Figure 13: Performance Measure 6

1.14 Other Performance Measure

Other Performance Measure

Please describe the other methodology used *

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

Additional Notes/Comments on Measure

Combined Rate(s) from Multiple Reporting Units

Did you Combine Rates from Multiple Reporting Units (e.g., Health Home Providers) to Create a Health Home State-Level Rate? *

Yes
 No

Optional Measure Stratification

If this measure is also reported by additional classifications/sub-categories, e.g. racial, ethnic, sex, language, disability status, or geography, complete the following as applicable.

Check all that apply

- Race (Non-Hispanic)
- Ethnicity
- Sex
- Primary Spoken Language
- Disability Status

Figure 14: Other Performance Measure

1.15 Deviations from Measure Specifications - Rate 1

Deviations from Measure Specifications

Did your calculation of the measure deviate from the measure specification in any way? *

Yes
 No

Please select and explain the deviation(s)

Rate 1: Initiation of AOD Treatment
Age Range: 13-17

- Numerator Explain *
- Denominator Explain *
- Other Explain *

Age Range: 18-64

- Numerator Explain *
- Denominator Explain *

Figure 15: Deviations from Measure Specifications 1

News Tasks (6) **Records** Reports Actions Applan

Age Range: 65 and older
 Numerator Explain *

Denominator Explain *

Other Explain *

Age Range: Total
 Numerator Explain *

Denominator Explain *

Other Explain *

Figure 16: Deviations from Measure Specifications 2

1.16 Deviations from Measure Specifications - Rate 2

News Tasks (6) **Records** Reports Actions Applan

Rate 2: Engagement of AOD Treatment
Age Range: 13-17
 Numerator Explain *

Denominator Explain *

Other Explain *

Age Range: 18-64
 Numerator Explain *

Denominator Explain *

Other Explain *

Figure 17: Deviations from Measure Specifications 3

Figure 18: Deviations from Measure Specifications 4

1.17 Optional Measure Stratification

Figure 19: Optional Measure Stratification 1

News Tasks (6) Records Reports Actions					Applan	
Age Range: 65 and older	0	0	0	Clear Row		
+ Additional/Alternative Classification/Sub-category						
Rate 2: Engagement of AOD Treatment						
Classification/Sub-category	Numerator	Denominator	Rate			
Age Range: 13-17	0	0	0	Clear Row		
Age Range: 18-64	0	0	0	Clear Row		
Age Range: 65 and older	0	0	0	Clear Row		
+ Additional/Alternative Classification/Sub-category						
<input checked="" type="checkbox"/> American Indian or Alaska Native						
Rate 1: Initiation of AOD Treatment						
Classification/Sub-category	Numerator	Denominator	Rate			
Age Range: 13-17	0	0	0	Clear Row		
Age Range: 18-64	0	0	0	Clear Row		
Age Range: 65 and older	0	0	0	Clear Row		
+ Additional/Alternative Classification/Sub-category						
Rate 2: Engagement of AOD Treatment						
Classification/Sub-category	Numerator	Denominator	Rate			
Age Range: 13-17	0	0	0	Clear Row		
Age Range: 18-64	0	0	0	Clear Row		
Age Range: 65 and older	0	0	0	Clear Row		
+ Additional/Alternative Classification/Sub-category						

Figure 20: Optional Measure Stratification 2

News Tasks (6) Records Reports Actions					Applan	
+ Additional/Alternative Classification/Sub-category						
<input checked="" type="checkbox"/> Asian						
Rate 1: Initiation of AOD Treatment						
Classification/Sub-category	Numerator	Denominator	Rate			
Age Range: 13-17	0	0	0	Clear Row		
Age Range: 18-64	0	0	0	Clear Row		
Age Range: 65 and older	0	0	0	Clear Row		
+ Additional/Alternative Classification/Sub-category						
Rate 2: Engagement of AOD Treatment						
Classification/Sub-category	Numerator	Denominator	Rate			
Age Range: 13-17	0	0	0	Clear Row		
Age Range: 18-64	0	0	0	Clear Row		
Age Range: 65 and older	0	0	0	Clear Row		
+ Additional/Alternative Classification/Sub-category						
<input checked="" type="checkbox"/> Native Hawaiian or Other Pacific Islander						
Rate 1: Initiation of AOD Treatment						
Classification/Sub-category	Numerator	Denominator	Rate			
Age Range: 13-17	0	0	0	Clear Row		
Age Range: 18-64	0	0	0	Clear Row		
Age Range: 65 and older	0	0	0	Clear Row		
+ Additional/Alternative Classification/Sub-category						
Rate 2: Engagement of AOD Treatment						

Figure 21: Optional Measure Stratification 3

Rate 2: Engagement of AOD Treatment			
Classification/Sub-category	Numerator	Denominator	Rate
Age Range: 13-17	0	0	0
Age Range: 18-64	0	0	0
Age Range: 65 and older	0	0	0

+ Additional/Alternative Classification/Sub-category

Ethnicity

Hispanic or Latino

Rate 1: Initiation of AOD Treatment			
Classification/Sub-category	Numerator	Denominator	Rate
Age Range: 13-17	0	0	0
Age Range: 18-64	0	0	0
Age Range: 65 and older	0	0	0

+ Additional/Alternative Classification/Sub-category

Rate 2: Engagement of AOD Treatment			
Classification/Sub-category	Numerator	Denominator	Rate
Age Range: 13-17	0	0	0
Age Range: 18-64	0	0	0
Age Range: 65 and older	0	0	0

+ Additional/Alternative Classification/Sub-category

Not Hispanic or Latino

Rate 1: Initiation of AOD Treatment			
Classification/Sub-category	Numerator	Denominator	Rate
Age Range: 13-17	0	0	0
Age Range: 18-64	0	0	0
Age Range: 65 and older	0	0	0

+ Additional/Alternative Classification/Sub-category

Figure 22: Optional Measure Stratification 4

+ Additional/Alternative Classification/Sub-category

Not Hispanic or Latino

Rate 1: Initiation of AOD Treatment			
Classification/Sub-category	Numerator	Denominator	Rate
Age Range: 13-17	0	0	0
Age Range: 18-64	0	0	0
Age Range: 65 and older	0	0	0

+ Additional/Alternative Classification/Sub-category

Rate 2: Engagement of AOD Treatment			
Classification/Sub-category	Numerator	Denominator	Rate
Age Range: 13-17	0	0	0
Age Range: 18-64	0	0	0
Age Range: 65 and older	0	0	0

+ Additional/Alternative Classification/Sub-category

+ Additional Ethnicity(ies)

Sex

Male

Rate 1: Initiation of AOD Treatment			
Classification/Sub-category	Numerator	Denominator	Rate
Age Range: 13-17	0	0	0
Age Range: 18-64	0	0	0
Age Range: 65 and older	0	0	0

+ Additional/Alternative Classification/Sub-category

Figure 23: Optional Measure Stratification 5

News Tasks (6) Records Reports Actions Applan				
Rate 2: Engagement of AOD Treatment				
Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 13-17	0	0	0	Clear Row
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65 and older	0	0	0	Clear Row
+ Additional/Alternative Classification/Sub-category				
<input checked="" type="checkbox"/> Female				
Rate 1: Initiation of AOD Treatment				
Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 13-17	0	0	0	Clear Row
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65 and older	0	0	0	Clear Row
+ Additional/Alternative Classification/Sub-category				
Rate 2: Engagement of AOD Treatment				
Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 13-17	0	0	0	Clear Row
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65 and older	0	0	0	Clear Row
+ Additional/Alternative Classification/Sub-category				
<input checked="" type="checkbox"/> Primary Spoken Language				
<input checked="" type="checkbox"/> English				
Rate 1: Initiation of AOD Treatment				

Figure 24: Optional Measure Stratification 6

News Tasks (6) Records Reports Actions Applan				
<input checked="" type="checkbox"/> Primary Spoken Language				
<input checked="" type="checkbox"/> English				
Rate 1: Initiation of AOD Treatment				
Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 13-17	0	0	0	Clear Row
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65 and older	0	0	0	Clear Row
+ Additional/Alternative Classification/Sub-category				
Rate 2: Engagement of AOD Treatment				
Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 13-17	0	0	0	Clear Row
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65 and older	0	0	0	Clear Row
+ Additional/Alternative Classification/Sub-category				
<input checked="" type="checkbox"/> Spanish				
Rate 1: Initiation of AOD Treatment				
Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 13-17	0	0	0	Clear Row
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65 and older	0	0	0	Clear Row
+ Additional/Alternative Classification/Sub-category				
Rate 2: Engagement of AOD Treatment				

Figure 25: Optional Measure Stratification 7

News Tasks (6) **Records** Reports Actions Applan

+ Additional/Alternative Classification/Sub-category

Rate 2: Engagement of AOD Treatment

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 13-17	0	0	0	Clear Row
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65 and older	0	0	0	Clear Row

+ Additional/Alternative Classification/Sub-category

+ Additional Primary Spoken Language(s)

Disability Status SSI

Rate 1: Initiation of AOD Treatment

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 13-17	0	0	0	Clear Row
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65 and older	0	0	0	Clear Row

+ Additional/Alternative Classification/Sub-category

Rate 2: Engagement of AOD Treatment

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 13-17	0	0	0	Clear Row
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65 and older	0	0	0	Clear Row

+ Additional/Alternative Classification/Sub-category

Non-SSI

Figure 26: Optional Measure Stratification 8

News Tasks (6) **Records** Reports Actions Applan

+ Additional/Alternative Classification/Sub-category

Non-SSI

Rate 1: Initiation of AOD Treatment

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 13-17	0	0	0	Clear Row
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65 and older	0	0	0	Clear Row

+ Additional/Alternative Classification/Sub-category

Rate 2: Engagement of AOD Treatment

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 13-17	0	0	0	Clear Row
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65 and older	0	0	0	Clear Row

+ Additional/Alternative Classification/Sub-category

+ Additional Disability Status(es)

Geography Urban

Rate 1: Initiation of AOD Treatment

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 13-17	0	0	0	Clear Row
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65 and older	0	0	0	Clear Row

+ Additional/Alternative Classification/Sub-category

Rate 2: Engagement of AOD Treatment

Figure 27: Optional Measure Stratification 9

Rate 2: Engagement of AOD Treatment

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 13-17	0	0	0	Clear Row
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65 and older	0	0	0	Clear Row

Rural

Rate 1: Initiation of AOD Treatment

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 13-17	0	0	0	Clear Row
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65 and older	0	0	0	Clear Row

Rate 2: Engagement of AOD Treatment

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 13-17	0	0	0	Clear Row
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65 and older	0	0	0	Clear Row

Final Comments (Optional)

Figure 28: Optional Measure Stratification 10

1.18 Final Comments and Report Documents

Final Comments (Optional)

Please enter any summary comments

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						

UPLOAD

DELETE DOCUMENT(S) **SAVE DOCUMENT(S)**

Figure 29: Final Comments and Report Documents

1.19 Initiation and Engagement of Alcohol and Other Drug Dependence Treatment (IET) - Path 2

News Tasks (6) **Records** Reports Actions Appian

Initiation and Engagement of Alcohol and Other Drug Dependence Treatment (IET)
 CMS-10434 OMB 0938-1188

Health Homes Quality Measure - NV - 2016 Request System Help

View Implementation Guide

Are you reporting on this measure? *

Yes

No

Please explain why you are not reporting on the measure
 Select all that apply (must select at least one)

Service not covered

Population not covered

Data not available

Portion of population not covered *

Entire population not covered

Partial population not covered

*** Explain the partial population not covered**

Explain why data not available
 Select all that apply (must select at least one)

Budget Constraints

Staff Constraints

Data Inconsistencies/Accuracy

*** Please explain**

Data not submitted by Providers to State

Data source not easily accessible

Reason *Select all that apply*

Requires medical record review

Figure 30: IET Reporting – No - 1

News Tasks (5) **Records** Reports Actions Appian

Data not available

Explain why data not available
 Select all that apply (must select at least one)

Budget Constraints

Staff Constraints

Data Inconsistencies/Accuracy

*** Please explain**

Data not submitted by Providers to State

Data source not easily accessible

Reason *Select all that apply*

Requires medical record review

Requires data linkage, which does not currently exist

Other

*** Please explain**

Information not collected

Reason *Select all that apply*

Figure 31: IET Reporting – No - 2

Information not collected

Reason *Select all that apply*

- Not collected by provider (hospital/health plan)
- Other

* Please explain

Other

* Please explain

Enter specific sample size *

Explain other reason why data not reported *

Small sample size (less than 30)

Continuous enrollment requirement not met due to start date of SPA

Other

Figure 32: IET Reporting – No – 3

Appendix A: Acronyms

Table 1: Acronyms

Acronym	Literal Translation
HHQM	Health Homes Quality Measure
IET	Initiation and Engagement of Alcohol and Other Drug Dependence Treatment
PRA	Paper Reduction Act of 1995



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

Medicaid and CHIP Program (MACPro)

HHQM – IU PRA document

Version 1.0

08/22/2017

Document Number: 227-QSSI-MACPro-PRA-HHQM-IU-D

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

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1. Health Homes Quality Measure

1.1 Inpatient Utilization (IU) Path - 1

The screenshot shows the 'Inpatient Utilization (IU)' reporting page. The header includes 'News', 'Tasks (6)', 'Records', 'Reports', and 'Actions'. The main title is 'Inpatient Utilization (IU)' with the identifier 'CMS-10434 OMB 0938-1188'. Below this, it specifies 'Health Homes Quality Measure - NV - 2016'. On the right side, there are buttons for 'REQUEST TECHNICAL ASSISTANCE', 'CLEAR', and 'VIEW ALL RESPONSES', along with links for 'Request System Help' and 'View Implementation Guide'. The 'Are you reporting on this measure?' section has 'Yes' selected. The 'Measurement Specification' section has 'Centers for Medicare and Medicaid Services (CMS)' selected. The 'Data Source' section has 'Administrative Data Only' and 'Other' as options.

Figure 1: IU Reported – Yes

1.2 Measurement Specification – Path 1

This screenshot shows the 'Measurement Specification' section of the reporting interface. It includes the same header and top navigation as Figure 1. The 'Are you reporting on this measure?' section remains 'Yes'. In the 'Measurement Specification' section, 'Centers for Medicare and Medicaid Services (CMS)' is selected. The 'Data Source' section has 'Administrative Data Only' selected. A new section, 'From where is the Administrative Data coming?', is visible, with 'Medicaid Management Information System (MMIS)' selected. Other options include 'Other'.

Figure 2: Measurement Specification 1

1.3 Measurement Specification – Path 2

News Tasks (6) **Records** Reports Actions Applan

Measurement Specification

Centers for Medicare and Medicaid Services (CMS)
 Other

Data Source

Administrative Data Only

From where is the Administrative Data coming?
 Must select one or more
 Medicaid Management Information System (MMIS)
 Other

Explain *

Figure 3: Measurement Specification 2

1.4 Date Range

News Tasks (6) **Records** Reports Actions Applan

Date Range

Please define the date range for the reporting period based on the "From" time period as the month and year that corresponds to the beginning period in which utilization took place and please report the "To" time period as the month and year that corresponds to the end period in which utilization took place. Do not report the year in which data were collected from the measure, or the version of HEDIS® used to calculate the measure, both of which may be different from the period corresponding to the utilization of services.

Start Date

Select Month Select Year
 Month Year

End Date

Select Month Select Year
 Month Year

Definition of Population Included in the Measure

Definition of Denominator

Figure 4: Date Range

1.5 Definition of Population Included in the Measure

News Tasks (6) **Records** Reports Actions Applan

Definition of Population Included in the Measure

Definition of Denominator
 Select all that apply

Denominator includes Medicaid population
 Denominator includes Medicare and Medicaid Dually-Eligible population
 Other

Does this denominator represent your total measure eligible population as defined by the Technical Specifications for this measure?
 Yes
 No

Specify *

Explain which populations are excluded and why *

Specify total measure-eligible population *

Figure 5: Denominator Representation 1

1.6 Selection of Delivery Systems

News Tasks (6) **Records** Reports Actions Applan

Which delivery systems are represented in the Denominator?
 Select all delivery systems that cover the measure-eligible population in your state. For each delivery system selected, report the percentage of the measure-eligible population that is represented in the data reported for the measure and the number of the health plans included (where applicable).

- Fees-for-Service (FFS)
- Primary Care Case Management (PCCM)
- Managed Care Organization / Pre-paid Inpatient Health Plan (MCO/PIHP)
- Integrated Care Models (ICM)
- Other

Percentage of measure-eligible state population represented in data reported *

Percentage of measure-eligible state population represented in data reported *

Number of Health Plans *

Percentage of measure-eligible state population represented in data reported *

Percentage of measure-eligible state population represented in data reported *

Describe *

Percentage of measure-eligible state population represented in data reported *

If applicable, list the number of Health Plans represented

Figure 6: Denominator Representation 2

1.7 Health Home Providers Representation

News Tasks (5) **Records** Reports Actions Applan

Are all Health Home Providers represented in the denominator? *

Yes

No

Performance Measure

The percentage of Health Home enrollees ages 18 to 74 who had an outpatient visit and whose body mass index (BMI) was documented during the measurement year or the year prior to the measurement year.

Age Range: 18-64

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

Character count: 0/2000

If applicable, list the number of Health Plans represented

Please explain *

Figure 7: Denominator Representation 3

1.8 Performance Measure (Checked all age range) – Path 1

News Tasks (6) Records Reports Actions Applan

Performance Measure

Rate of acute inpatient care and services (total, maternity, mental and behavioral disorders, surgery, and medicine) per 1,000 enrollee months among Health Home enrollees.

Enrollee Months

Age Range: 0-17 Number of Enrollee Months*

Age Range: 18-64 Number of Enrollee Months*

Age Range: 65 and older Number of Enrollee Months*

Age Range: Unknown Number of Enrollee Months*

Age Range: Total Number of Enrollee Months*

Inpatient

Age Range: 0-17

Number of Discharges	Discharges per 1,000 Enrollee Months	Number of days	Days per 1,000 Enrollee Months	Average length of stay
<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	

Age Range: 18-64

Number of Discharges	Discharges per 1,000 Enrollee Months	Number of days	Days per 1,000 Enrollee Months	Average length of stay
<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	

Age Range: 65 and older

Number of Discharges	Discharges per 1,000 Enrollee Months	Number of days	Days per 1,000 Enrollee Months	Average length of stay
<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	

Age Range: Unknown

Number of Discharges	Discharges per 1,000 Enrollee Months	Number of days	Days per 1,000 Enrollee Months	Average length of stay
<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	

Figure 8: Performance Measure 1

News Tasks (6) Records Reports Actions Applan

Age Range: Unknown

Number of Discharges	Discharges per 1,000 Enrollee Months	Number of days	Days per 1,000 Enrollee Months	Average length of stay
<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	

Age Range: Total

Number of Discharges	Discharges per 1,000 Enrollee Months	Number of days	Days per 1,000 Enrollee Months	Average length of stay
<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	

Maternity

Age Range: 18-64

Number of Discharges	Discharges per 1,000 Enrollee Months	Number of days	Days per 1,000 Enrollee Months	Average length of stay
<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	

The option "Denominator includes Medicare and Medicaid Dually-Eligible population" was selected in the "Definition of Population included in the Measure" section; however, no data were reported for the population age 65 and older. Are data available for population age 65 and over? *

Yes

No

Age Range: Unknown

Number of Discharges	Discharges per 1,000 Enrollee Months	Number of days	Days per 1,000 Enrollee Months	Average length of stay
<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	

Age Range: Total

Number of Discharges	Discharges per 1,000 Enrollee Months	Number of days	Days per 1,000 Enrollee Months	Average length of stay
<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	

Mental and Behavioral Disorders

Age Range: 0-17

Number of Discharges	Discharges per 1,000 Enrollee Months	Number of days	Days per 1,000 Enrollee Months	Average length of stay
<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	

Age Range: 18-64

Number of Discharges	Discharges per 1,000 Enrollee Months	Number of days	Days per 1,000 Enrollee Months	Average length of stay
<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	

Figure 9: Performance Measure 2

News Tasks (6) Records Reports Actions Applan					
<input checked="" type="checkbox"/> Age Range: 18-64					
Number of Discharges	Discharges per 1,000 Enrollee Months	Number of days	Days per 1,000 Enrollee Months	Average length of stay	
0	0	0	0		
<input checked="" type="checkbox"/> Age Range: 65 and older					
Number of Discharges	Discharges per 1,000 Enrollee Months	Number of days	Days per 1,000 Enrollee Months	Average length of stay	
0	0	0	0		
<input checked="" type="checkbox"/> Age Range: Unknown					
Number of Discharges	Discharges per 1,000 Enrollee Months	Number of days	Days per 1,000 Enrollee Months	Average length of stay	
0	0	0	0		
<input checked="" type="checkbox"/> Age Range: Total					
Number of Discharges	Discharges per 1,000 Enrollee Months	Number of days	Days per 1,000 Enrollee Months	Average length of stay	
0	0	0	0		
Surgery					
<input checked="" type="checkbox"/> Age Range: 0-17					
Number of Discharges	Discharges per 1,000 Enrollee Months	Number of days	Days per 1,000 Enrollee Months	Average length of stay	
0	0	0	0		
<input checked="" type="checkbox"/> Age Range: 18-64					
Number of Discharges	Discharges per 1,000 Enrollee Months	Number of days	Days per 1,000 Enrollee Months	Average length of stay	
0	0	0	0		
<input checked="" type="checkbox"/> Age Range: 65 and older					
Number of Discharges	Discharges per 1,000 Enrollee Months	Number of days	Days per 1,000 Enrollee Months	Average length of stay	
0	0	0	0		
<input checked="" type="checkbox"/> Age Range: Unknown					
Number of Discharges	Discharges per 1,000 Enrollee Months	Number of days	Days per 1,000 Enrollee Months	Average length of stay	
0	0	0	0		

Figure 10: Performance Measure 3

News Tasks (6) Records Reports Actions Applan					
<input checked="" type="checkbox"/> Age Range: Unknown					
Number of Discharges	Discharges per 1,000 Enrollee Months	Number of days	Days per 1,000 Enrollee Months	Average length of stay	
0	0	0	0		
<input checked="" type="checkbox"/> Age Range: Total					
Number of Discharges	Discharges per 1,000 Enrollee Months	Number of days	Days per 1,000 Enrollee Months	Average length of stay	
0	0	0	0		
Medicine					
<input checked="" type="checkbox"/> Age Range: 0-17					
Number of Discharges	Discharges per 1,000 Enrollee Months	Number of days	Days per 1,000 Enrollee Months	Average length of stay	
0	0	0	0		
<input checked="" type="checkbox"/> Age Range: 18-64					
Number of Discharges	Discharges per 1,000 Enrollee Months	Number of days	Days per 1,000 Enrollee Months	Average length of stay	
0	0	0	0		
<input checked="" type="checkbox"/> Age Range: 65 and older					
Number of Discharges	Discharges per 1,000 Enrollee Months	Number of days	Days per 1,000 Enrollee Months	Average length of stay	
0	0	0	0		
<input checked="" type="checkbox"/> Age Range: Unknown					
Number of Discharges	Discharges per 1,000 Enrollee Months	Number of days	Days per 1,000 Enrollee Months	Average length of stay	
0	0	0	0		
<input checked="" type="checkbox"/> Age Range: Total					
Number of Discharges	Discharges per 1,000 Enrollee Months	Number of days	Days per 1,000 Enrollee Months	Average length of stay	
0	0	0	0		
Additional Notes/Comments on Measure					

Figure 11: Performance Measure 4

1.9 Performance Measure (Check one age range) Path 2 Option Yes

Figure 12: Performance Measure 5

1.10 Performance Measure (Check one age range) Path 2 Option No

Figure 13: Performance Measure 6

1.11 Performance Measure (Check all age range) Path 3 Option Yes

Figure 14: Performance Measure 7

News Tasks (6) **Records** Reports Actions Applan

Inpatient

Age Range: 0-17

Number of Discharges	Discharges per 1,000 Enrollee Months	Number of days	Days per 1,000 Enrollee Months	Average length of stay
0	0	0	0	

Age Range: 18-64

Number of Discharges	Discharges per 1,000 Enrollee Months	Number of days	Days per 1,000 Enrollee Months	Average length of stay
0	0	0	0	

Age Range: 65 and older

Number of Discharges	Discharges per 1,000 Enrollee Months	Number of days	Days per 1,000 Enrollee Months	Average length of stay
0	0	0	0	

The option "Denominator includes Medicare and Medicaid Dually-Eligible population" was not selected in the "Definition of Population Included in the Measure." Is the Medicare and Medicaid Dually-Eligible population included in this denominator?*

Yes
 No

Age Range: Unknown

Number of Discharges	Discharges per 1,000 Enrollee Months	Number of days	Days per 1,000 Enrollee Months	Average length of stay
0	0	0	0	

Age Range: Total

Number of Discharges	Discharges per 1,000 Enrollee Months	Number of days	Days per 1,000 Enrollee Months	Average length of stay
0	0	0	0	

Maternity

Age Range: 18-64

Number of Discharges	Discharges per 1,000 Enrollee Months	Number of days	Days per 1,000 Enrollee Months	Average length of stay

Figure 15: Performance Measure 8

News Tasks (6) **Records** Reports Actions Applan

Mental and Behavioral Disorders

Age Range: 0-17

Number of Discharges	Discharges per 1,000 Enrollee Months	Number of days	Days per 1,000 Enrollee Months	Average length of stay
0	0	0	0	

Age Range: 18-64

Number of Discharges	Discharges per 1,000 Enrollee Months	Number of days	Days per 1,000 Enrollee Months	Average length of stay
0	0	0	0	

Age Range: 65 and older

Number of Discharges	Discharges per 1,000 Enrollee Months	Number of days	Days per 1,000 Enrollee Months	Average length of stay
0	0	0	0	

The option "Denominator includes Medicare and Medicaid Dually-Eligible population" was not selected in the "Definition of Population Included in the Measure." Is the Medicare and Medicaid Dually-Eligible population included in this denominator?*

Yes
 No

Age Range: Unknown

Number of Discharges	Discharges per 1,000 Enrollee Months	Number of days	Days per 1,000 Enrollee Months	Average length of stay
0	0	0	0	

Age Range: Total

Number of Discharges	Discharges per 1,000 Enrollee Months	Number of days	Days per 1,000 Enrollee Months	Average length of stay
0	0	0	0	

Surgery

Age Range: 0-17

Number of Discharges	Discharges per 1,000 Enrollee Months	Number of days	Days per 1,000 Enrollee Months	Average length of stay

Figure 16: Performance Measure 9

News Tasks (6) **Records** Reports Actions Appian

Surgery

Age Range: 0-17

Number of Discharges	Discharges per 1,000 Enrollee Months	Number of days	Days per 1,000 Enrollee Months	Average length of stay
0	0	0	0	

Age Range: 18-64

Number of Discharges	Discharges per 1,000 Enrollee Months	Number of days	Days per 1,000 Enrollee Months	Average length of stay
0	0	0	0	

Age Range: 65 and older

Number of Discharges	Discharges per 1,000 Enrollee Months	Number of days	Days per 1,000 Enrollee Months	Average length of stay
0	0	0	0	

The option "Denominator includes Medicare and Medicaid Dually-Eligible population" was not selected in the "Definition of Population included in the Measure." Is the Medicare and Medicaid Dually-Eligible population included in this denominator? *

Yes
 No

Age Range: Unknown

Number of Discharges	Discharges per 1,000 Enrollee Months	Number of days	Days per 1,000 Enrollee Months	Average length of stay
0	0	0	0	

Age Range: Total

Number of Discharges	Discharges per 1,000 Enrollee Months	Number of days	Days per 1,000 Enrollee Months	Average length of stay
0	0	0	0	

Medicine

Age Range: 0-17

Number of Discharges	Discharges per 1,000 Enrollee Months	Number of days	Days per 1,000 Enrollee Months	Average length of stay

Figure 17: Performance Measure 10

News Tasks (6) **Records** Reports Actions Appian

Medicine

Age Range: 0-17

Number of Discharges	Discharges per 1,000 Enrollee Months	Number of days	Days per 1,000 Enrollee Months	Average length of stay
0	0	0	0	

Age Range: 18-64

Number of Discharges	Discharges per 1,000 Enrollee Months	Number of days	Days per 1,000 Enrollee Months	Average length of stay
0	0	0	0	

Age Range: 65 and older

Number of Discharges	Discharges per 1,000 Enrollee Months	Number of days	Days per 1,000 Enrollee Months	Average length of stay
0	0	0	0	

The option "Denominator includes Medicare and Medicaid Dually-Eligible population" was not selected in the "Definition of Population included in the Measure." Is the Medicare and Medicaid Dually-Eligible population included in this denominator? *

Yes
 No

Age Range: Unknown

Number of Discharges	Discharges per 1,000 Enrollee Months	Number of days	Days per 1,000 Enrollee Months	Average length of stay
0	0	0	0	

Age Range: Total

Number of Discharges	Discharges per 1,000 Enrollee Months	Number of days	Days per 1,000 Enrollee Months	Average length of stay
0	0	0	0	

Additional Notes/Comments on Measure

Figure 18: Performance Measure 11

1.12 Performance Measure (Checked all age range) Path 3 Option No

News Tasks (6) **Records** Reports Actions Appian

Performance Measure +/-

Rate of acute inpatient care and services (total, maternity, mental and behavioral disorders, surgery, and medicine) per 1,000 enrollee months among Health Home enrollees.

Enrollee Months

Age Range: 0-17

Age Range: 18-64

Age Range: 65 and older

Age Range: Unknown

Age Range: Total

The option "Denominator includes Medicare and Medicaid Dually-Eligible population" was not selected in the "Definition of Population included in the Measure." Is the Medicare and Medicaid Dually-Eligible population included in this denominator? *

Yes

No

"Denominator includes Medicare and Medicaid Dually-Eligible Population" was not selected, please explain why *

Number of Enrollee Months *

Number of Enrollee Months *

Number of Enrollee Months *

Number of Enrollee Months *

Number of Enrollee Months *

Number of Enrollee Months *

Inpatient

Age Range: 0-17

Number of Discharges	Discharges per 1,000 Enrollee Months	Number of days	Days per 1,000 Enrollee Months	Average length of stay
<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>

Age Range: 18-64

Figure 19: Performance Measure 12

News Tasks (7) **Records** Reports Actions Appian

Inpatient

Age Range: 0-17

Number of Discharges	Discharges per 1,000 Enrollee Months	Number of days	Days per 1,000 Enrollee Months	Average length of stay
<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>

Age Range: 18-64

Number of Discharges	Discharges per 1,000 Enrollee Months	Number of days	Days per 1,000 Enrollee Months	Average length of stay
<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>

Age Range: 65 and older

Number of Discharges	Discharges per 1,000 Enrollee Months	Number of days	Days per 1,000 Enrollee Months	Average length of stay
<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>

The option "Denominator includes Medicare and Medicaid Dually-Eligible population" was not selected in the "Definition of Population included in the Measure." Is the Medicare and Medicaid Dually-Eligible population included in this denominator? *


Yes

No

"Denominator includes Medicare and Medicaid Dually-Eligible Population" was not selected, please explain why *

Age Range: Unknown

Figure 20: Performance Measure 13

News Tasks (7) **Records** Reports Actions 

Mental and Behavioral Disorders

Age Range: 0-17

Number of Discharges	Discharges per 1,000 Enrollee Months	Number of days	Days per 1,000 Enrollee Months	Average length of stay
0	0	0	0	

Age Range: 18-64

Number of Discharges	Discharges per 1,000 Enrollee Months	Number of days	Days per 1,000 Enrollee Months	Average length of stay
0	0	0	0	

Age Range: 65 and older

Number of Discharges	Discharges per 1,000 Enrollee Months	Number of days	Days per 1,000 Enrollee Months	Average length of stay
0	0	0	0	

The option "Denominator includes Medicare and Medicaid Dually-Eligible population" was not selected in the "Definition of Population included in the Measure." Is the Medicare and Medicaid Dually-Eligible population included in this denominator?*

Yes


No

"Denominator includes Medicare and Medicaid Dually-Eligible Population" was not selected, please explain why*

Age Range: Unknown

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

Figure 21: Performance Measure 14

News Tasks (7) **Records** Reports Actions 

Surgery

Age Range: 0-17

Number of Discharges	Discharges per 1,000 Enrollee Months	Number of days	Days per 1,000 Enrollee Months	Average length of stay
0	0	0	0	

Age Range: 18-64

Number of Discharges	Discharges per 1,000 Enrollee Months	Number of days	Days per 1,000 Enrollee Months	Average length of stay
0	0	0	0	

Age Range: 65 and older

Number of Discharges	Discharges per 1,000 Enrollee Months	Number of days	Days per 1,000 Enrollee Months	Average length of stay
0	0	0	0	

The option "Denominator includes Medicare and Medicaid Dually-Eligible population" was not selected in the "Definition of Population included in the Measure." Is the Medicare and Medicaid Dually-Eligible population included in this denominator?*

Yes

No

"Denominator includes Medicare and Medicaid Dually-Eligible Population" was not selected, please explain why*

Age Range: Unknown

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

Figure 22: Performance Measure 15

News Tasks (7) **Records** Reports Actions Applan

Medicine

Age Range: 0-17

Number of Discharges	Discharges per 1,000 Enrollee Months	Number of days	Days per 1,000 Enrollee Months	Average length of stay
0	0	0	0	

Age Range: 18-64

Number of Discharges	Discharges per 1,000 Enrollee Months	Number of days	Days per 1,000 Enrollee Months	Average length of stay
0	0	0	0	

Age Range: 65 and older

Number of Discharges	Discharges per 1,000 Enrollee Months	Number of days	Days per 1,000 Enrollee Months	Average length of stay
0	0	0	0	

The option "Denominator includes Medicare and Medicaid Dually-Eligible population" was not selected in the "Definition of Population included in the Measure." Is the Medicare and Medicaid Dually-Eligible population included in this denominator?*

Yes

No

"Denominator includes Medicare and Medicaid Dually-Eligible Population" was not selected, please explain why *

Age Range: Unknown

Number of Discharges	Discharges per 1,000 Enrollee Months	Number of days	Days per 1,000 Enrollee Months	Average length of stay

Figure 23: Performance Measure 16

1.13 Other Performance Measure

News Tasks (5) **Records** Reports Actions Applan

Other Performance Measure

Please describe the other methodology used *

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

+ Additional/Other Rate(s)

Additional Notes/Comments on Measure

Combined Rate(s) from Multiple Reporting Units

Did you Combine Rates from Multiple Reporting Units (e.g., Health Home Providers) to Create a Health Home State-Level Rate? *

Yes

No

Figure 24: Other Performance Measure

1.14 Deviations from Measure Specifications

The screenshot shows a web interface with a top navigation bar containing 'News', 'Tasks (6)', 'Records', 'Reports', and 'Actions'. A user profile icon for 'Applan' is in the top right. The main heading is 'Deviations from Measure Specifications'. Below this, a question asks 'Did your calculation of the measure deviate from the measure specification in any way? *' with radio buttons for 'Yes' (selected) and 'No'. A prompt says 'Please select and explain the deviation(s)'. Under 'Age Range: 0-17', there are three checked checkboxes: 'Numerator', 'Denominator', and 'Other'. To the right of each checkbox is a text area labeled 'Explain *'. The 'Age Range: 18-64' section is partially visible below.

Figure 25: Deviations from Measure Specifications 1

The screenshot shows the same web interface as Figure 25. The 'Age Range: 65 and older' section is the primary focus, with checked checkboxes for 'Numerator', 'Denominator', and 'Other'. Each checkbox is followed by an 'Explain *' text area. The 'Age Range: Total' section is also visible at the bottom, with a checked checkbox for 'Numerator' and its corresponding 'Explain *' text area.

Figure 26: Deviations from Measure Specifications 2

Figure 27: Deviations from Measure Specifications 3

1.15 Optional Measure Stratification

Figure 28: Optional Measure Stratification 1

News Tasks (6) Records Reports Actions					Applan
Mental Health					
Classification/Sub-category	Numerator	Denominator	Rate		
Age Range: 0-17	0	0	0	Clear	Row
Age Range: 18-64	0	0	0	Clear	Row
Age Range: 65 and older	0	0	0	Clear	Row
Age Range: Unknown	0	0	0	Clear	Row
+ Additional/Alternative Classification/Sub-category					
Surgery					
Classification/Sub-category	Numerator	Denominator	Rate		
Age Range: 0-17	0	0	0	Clear	Row
Age Range: 18-64	0	0	0	Clear	Row
Age Range: 65 and older	0	0	0	Clear	Row
Age Range: Unknown	0	0	0	Clear	Row
+ Additional/Alternative Classification/Sub-category					
Medicine					
Classification/Sub-category	Numerator	Denominator	Rate		
Age Range: 0-17	0	0	0	Clear	Row
Age Range: 18-64	0	0	0	Clear	Row
Age Range: 65 and older	0	0	0	Clear	Row
Age Range: Unknown	0	0	0	Clear	Row

Figure 29: Optional Measure Stratification 2

News Tasks (6) Records Reports Actions					Applan
+ Additional/Alternative Classification/Sub-category					
<input checked="" type="checkbox"/> Black or African American					
Inpatient					
Classification/Sub-category	Numerator	Denominator	Rate		
Age Range: 0-17	0	0	0	Clear	Row
Age Range: 18-64	0	0	0	Clear	Row
Age Range: 65 and older	0	0	0	Clear	Row
Age Range: Unknown	0	0	0	Clear	Row
+ Additional/Alternative Classification/Sub-category					
Maternity					
Classification/Sub-category	Numerator	Denominator	Rate		
Age Range: 0-17	0	0	0	Clear	Row
Age Range: 18-64	0	0	0	Clear	Row
Age Range: 65 and older	0	0	0	Clear	Row
Age Range: Unknown	0	0	0	Clear	Row
+ Additional/Alternative Classification/Sub-category					
Mental Health					
Classification/Sub-category	Numerator	Denominator	Rate		
Age Range: 0-17	0	0	0	Clear	Row
Age Range: 18-64	0	0	0	Clear	Row
Age Range: 65 and older	0	0	0	Clear	Row

Figure 30: Optional Measure Stratification 3

News Tasks (6) Records Reports Actions					Applan	
Age Range: 18-64		0	0	0	Clear Row	
Age Range: 65 and older		0	0	0	Clear Row	
Age Range: Unknown		0	0	0	Clear Row	
+ Additional/Alternative Classification/Sub-category						
Surgery						
Classification/Sub-category		Numerator	Denominator	Rate		
Age Range: 0-17		0	0	0	Clear Row	
Age Range: 18-64		0	0	0	Clear Row	
Age Range: 65 and older		0	0	0	Clear Row	
Age Range: Unknown		0	0	0	Clear Row	
+ Additional/Alternative Classification/Sub-category						
Medicine						
Classification/Sub-category		Numerator	Denominator	Rate		
Age Range: 0-17		0	0	0	Clear Row	
Age Range: 18-64		0	0	0	Clear Row	
Age Range: 65 and older		0	0	0	Clear Row	
Age Range: Unknown		0	0	0	Clear Row	
+ Additional/Alternative Classification/Sub-category						
<input checked="" type="checkbox"/> American Indian or Alaska Native						
Inpatient						
Classification/Sub-category		Numerator	Denominator	Rate		

Figure 31: Optional Measure Stratification 4

News Tasks (6) Records Reports Actions					Applan	
<input checked="" type="checkbox"/> American Indian or Alaska Native						
Inpatient						
Classification/Sub-category		Numerator	Denominator	Rate		
Age Range: 0-17		0	0	0	Clear Row	
Age Range: 18-64		0	0	0	Clear Row	
Age Range: 65 and older		0	0	0	Clear Row	
Age Range: Unknown		0	0	0	Clear Row	
+ Additional/Alternative Classification/Sub-category						
Maternity						
Classification/Sub-category		Numerator	Denominator	Rate		
Age Range: 0-17		0	0	0	Clear Row	
Age Range: 18-64		0	0	0	Clear Row	
Age Range: 65 and older		0	0	0	Clear Row	
Age Range: Unknown		0	0	0	Clear Row	
+ Additional/Alternative Classification/Sub-category						
Mental Health						
Classification/Sub-category		Numerator	Denominator	Rate		
Age Range: 0-17		0	0	0	Clear Row	
Age Range: 18-64		0	0	0	Clear Row	
Age Range: 65 and older		0	0	0	Clear Row	
Age Range: Unknown		0	0	0	Clear Row	

Figure 32: Optional Measure Stratification 5

News Tasks (6) Records Reports Actions Applan				
Age Range: 65 and older	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	Clear Row
Age Range: Unknown	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	Clear Row
+ Additional/Alternative Classification/Sub-category				
Surgery				
Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 0-17	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	Clear Row
Age Range: 18-64	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	Clear Row
Age Range: 65 and older	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	Clear Row
Age Range: Unknown	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	Clear Row
+ Additional/Alternative Classification/Sub-category				
Medicine				
Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 0-17	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	Clear Row
Age Range: 18-64	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	Clear Row
Age Range: 65 and older	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	Clear Row
Age Range: Unknown	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	Clear Row
+ Additional/Alternative Classification/Sub-category				
<input checked="" type="checkbox"/> Asian				
Inpatient				
Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 0-17	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	Clear Row

Figure 33: Optional Measure Stratification 6

News Tasks (6) Records Reports Actions Applan				
+ Additional/Alternative Classification/Sub-category				
<input checked="" type="checkbox"/> Asian				
Inpatient				
Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 0-17	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	Clear Row
Age Range: 18-64	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	Clear Row
Age Range: 65 and older	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	Clear Row
Age Range: Unknown	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	Clear Row
+ Additional/Alternative Classification/Sub-category				
Maternity				
Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 0-17	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	Clear Row
Age Range: 18-64	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	Clear Row
Age Range: 65 and older	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	Clear Row
Age Range: Unknown	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	Clear Row
+ Additional/Alternative Classification/Sub-category				
Mental Health				
Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 0-17	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	Clear Row
Age Range: 18-64	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	Clear Row
Age Range: 65 and older	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	Clear Row

Figure 34: Optional Measure Stratification 7

News Tasks (6) Records Reports Actions				Applan	
Age Range: 65 and older	0	0	0	Clear Row	
Age Range: Unknown	0	0	0	Clear Row	
+ Additional/Alternative Classification/Sub-category					
Surgery					
Classification/Sub-category	Numerator	Denominator	Rate		
Age Range: 0-17	0	0	0	Clear Row	
Age Range: 18-64	0	0	0	Clear Row	
Age Range: 65 and older	0	0	0	Clear Row	
Age Range: Unknown	0	0	0	Clear Row	
+ Additional/Alternative Classification/Sub-category					
Medicine					
Classification/Sub-category	Numerator	Denominator	Rate		
Age Range: 0-17	0	0	0	Clear Row	
Age Range: 18-64	0	0	0	Clear Row	
Age Range: 65 and older	0	0	0	Clear Row	
Age Range: Unknown	0	0	0	Clear Row	
+ Additional/Alternative Classification/Sub-category					
<input checked="" type="checkbox"/> Native Hawaiian or Other Pacific Islander					
Inpatient					
Classification/Sub-category	Numerator	Denominator	Rate		
Age Range: 0-17	0	0	0	Clear Row	

Figure 35: Optional Measure Stratification 8

News Tasks (6) Records Reports Actions				Applan	
<input checked="" type="checkbox"/> Native Hawaiian or Other Pacific Islander					
Inpatient					
Classification/Sub-category	Numerator	Denominator	Rate		
Age Range: 0-17	0	0	0	Clear Row	
Age Range: 18-64	0	0	0	Clear Row	
Age Range: 65 and older	0	0	0	Clear Row	
Age Range: Unknown	0	0	0	Clear Row	
+ Additional/Alternative Classification/Sub-category					
Maternity					
Classification/Sub-category	Numerator	Denominator	Rate		
Age Range: 0-17	0	0	0	Clear Row	
Age Range: 18-64	0	0	0	Clear Row	
Age Range: 65 and older	0	0	0	Clear Row	
Age Range: Unknown	0	0	0	Clear Row	
+ Additional/Alternative Classification/Sub-category					
Mental Health					
Classification/Sub-category	Numerator	Denominator	Rate		
Age Range: 0-17	0	0	0	Clear Row	
Age Range: 18-64	0	0	0	Clear Row	
Age Range: 65 and older	0	0	0	Clear Row	
Age Range: Unknown	0	0	0	Clear Row	

Figure 36: Optional Measure Stratification 9

News Tasks (6) Records Reports Actions				Applan	
Age Range: 65 and older	0	0	0	Clear Row	
Age Range: Unknown	0	0	0	Clear Row	
+ Additional/Alternative Classification/Sub-category					
Surgery					
Classification/Sub-category	Numerator	Denominator	Rate		
Age Range: 0-17	0	0	0	Clear Row	
Age Range: 18-64	0	0	0	Clear Row	
Age Range: 65 and older	0	0	0	Clear Row	
Age Range: Unknown	0	0	0	Clear Row	
+ Additional/Alternative Classification/Sub-category					
Medicine					
Classification/Sub-category	Numerator	Denominator	Rate		
Age Range: 0-17	0	0	0	Clear Row	
Age Range: 18-64	0	0	0	Clear Row	
Age Range: 65 and older	0	0	0	Clear Row	
Age Range: Unknown	0	0	0	Clear Row	
+ Additional/Alternative Classification/Sub-category					
+ Additional Race(s)					
<input checked="" type="checkbox"/> Ethnicity <input checked="" type="checkbox"/> Hispanic or Latino					
Inpatient					

Figure 37: Optional Measure Stratification 10

News Tasks (6) Records Reports Actions				Applan	
<input checked="" type="checkbox"/> Ethnicity <input checked="" type="checkbox"/> Hispanic or Latino					
Inpatient					
Classification/Sub-category	Numerator	Denominator	Rate		
Age Range: 0-17	0	0	0	Clear Row	
Age Range: 18-64	0	0	0	Clear Row	
Age Range: 65 and older	0	0	0	Clear Row	
Age Range: Unknown	0	0	0	Clear Row	
+ Additional/Alternative Classification/Sub-category					
Maternity					
Classification/Sub-category	Numerator	Denominator	Rate		
Age Range: 0-17	0	0	0	Clear Row	
Age Range: 18-64	0	0	0	Clear Row	
Age Range: 65 and older	0	0	0	Clear Row	
Age Range: Unknown	0	0	0	Clear Row	
+ Additional/Alternative Classification/Sub-category					
Mental Health					
Classification/Sub-category	Numerator	Denominator	Rate		
Age Range: 0-17	0	0	0	Clear Row	
Age Range: 18-64	0	0	0	Clear Row	
Age Range: 65 and older	0	0	0	Clear Row	

Figure 38: Optional Measure Stratification 11

News Tasks (6) Records Reports Actions				Applan	
Age Range: Unknown	0	0	0	Clear Row	
+ Additional/Alternative Classification/Sub-category					
Surgery					
Classification/Sub-category	Numerator	Denominator	Rate		
Age Range: 0-17	0	0	0	Clear Row	
Age Range: 18-64	0	0	0	Clear Row	
Age Range: 65 and older	0	0	0	Clear Row	
Age Range: Unknown	0	0	0	Clear Row	
+ Additional/Alternative Classification/Sub-category					
Medicine					
Classification/Sub-category	Numerator	Denominator	Rate		
Age Range: 0-17	0	0	0	Clear Row	
Age Range: 18-64	0	0	0	Clear Row	
Age Range: 65 and older	0	0	0	Clear Row	
Age Range: Unknown	0	0	0	Clear Row	
+ Additional/Alternative Classification/Sub-category					
<input checked="" type="checkbox"/> Not Hispanic or Latino					
Inpatient					
Classification/Sub-category	Numerator	Denominator	Rate		
Age Range: 0-17	0	0	0	Clear Row	
Age Range: 18-64	0	0	0	Clear Row	

Figure 39: Optional Measure Stratification 12

News Tasks (6) Records Reports Actions				Applan	
+ Additional/Alternative Classification/Sub-category					
<input checked="" type="checkbox"/> Not Hispanic or Latino					
Inpatient					
Classification/Sub-category	Numerator	Denominator	Rate		
Age Range: 0-17	0	0	0	Clear Row	
Age Range: 18-64	0	0	0	Clear Row	
Age Range: 65 and older	0	0	0	Clear Row	
Age Range: Unknown	0	0	0	Clear Row	
+ Additional/Alternative Classification/Sub-category					
Maternity					
Classification/Sub-category	Numerator	Denominator	Rate		
Age Range: 0-17	0	0	0	Clear Row	
Age Range: 18-64	0	0	0	Clear Row	
Age Range: 65 and older	0	0	0	Clear Row	
Age Range: Unknown	0	0	0	Clear Row	
+ Additional/Alternative Classification/Sub-category					
Mental Health					
Classification/Sub-category	Numerator	Denominator	Rate		
Age Range: 0-17	0	0	0	Clear Row	
Age Range: 18-64	0	0	0	Clear Row	
Age Range: 65 and older	0	0	0	Clear Row	

Figure 40: Optional Measure Stratification 13

News Tasks (6) Records Reports Actions Applan				
Age Range: Unknown	0	0	0	Clear Row
+ Additional/Alternative Classification/Sub-category				
Surgery				
Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 0-17	0	0	0	Clear Row
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65 and older	0	0	0	Clear Row
Age Range: Unknown	0	0	0	Clear Row
+ Additional/Alternative Classification/Sub-category				
Medicine				
Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 0-17	0	0	0	Clear Row
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65 and older	0	0	0	Clear Row
Age Range: Unknown	0	0	0	Clear Row
+ Additional/Alternative Classification/Sub-category				
+ Additional Ethnicities)				
<input checked="" type="checkbox"/> Sex <input checked="" type="checkbox"/> Male				
Inpatient				
Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 0-17	0	0	0	Clear Row

Figure 41: Optional Measure Stratification 14

News Tasks (6) Records Reports Actions Applan				
Inpatient				
Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 0-17	0	0	0	Clear Row
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65 and older	0	0	0	Clear Row
Age Range: Unknown	0	0	0	Clear Row
+ Additional/Alternative Classification/Sub-category				
Maternity				
Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 0-17	0	0	0	Clear Row
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65 and older	0	0	0	Clear Row
Age Range: Unknown	0	0	0	Clear Row
+ Additional/Alternative Classification/Sub-category				
Mental Health				
Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 0-17	0	0	0	Clear Row
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65 and older	0	0	0	Clear Row
Age Range: Unknown	0	0	0	Clear Row

Figure 42: Optional Measure Stratification 15

News Tasks (6) Records Reports Actions Applan				
Surgery				
Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 0-17	0	0	0	Clear Row
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65 and older	0	0	0	Clear Row
Age Range: Unknown	0	0	0	Clear Row
+ Additional/Alternative Classification/Sub-category				
Medicine				
Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 0-17	0	0	0	Clear Row
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65 and older	0	0	0	Clear Row
Age Range: Unknown	0	0	0	Clear Row
+ Additional/Alternative Classification/Sub-category				
<input checked="" type="checkbox"/> Female				
Inpatient				
Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 0-17	0	0	0	Clear Row
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65 and older	0	0	0	Clear Row
Age Range: Unknown	0	0	0	Clear Row

Figure 43: Optional Measure Stratification 16

News Tasks (6) Records Reports Actions Applan				
+ Additional/Alternative Classification/Sub-category				
Maternity				
Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 0-17	0	0	0	Clear Row
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65 and older	0	0	0	Clear Row
Age Range: Unknown	0	0	0	Clear Row
+ Additional/Alternative Classification/Sub-category				
Mental Health				
Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 0-17	0	0	0	Clear Row
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65 and older	0	0	0	Clear Row
Age Range: Unknown	0	0	0	Clear Row
+ Additional/Alternative Classification/Sub-category				
Surgery				
Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 0-17	0	0	0	Clear Row
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65 and older	0	0	0	Clear Row
Age Range: Unknown	0	0	0	Clear Row

Figure 44: Optional Measure Stratification 17

Medicine			
Classification/Sub-category	Numerator	Denominator	Rate
Age Range: 0-17	0	0	0 Clear Row
Age Range: 18-64	0	0	0 Clear Row
Age Range: 65 and older	0	0	0 Clear Row
Age Range: Unknown	0	0	0 Clear Row
+ Additional/Alternative Classification/Sub-category			
<input checked="" type="checkbox"/> Primary Spoken Language <input checked="" type="checkbox"/> English			
Inpatient			
Classification/Sub-category	Numerator	Denominator	Rate
Age Range: 0-17	0	0	0 Clear Row
Age Range: 18-64	0	0	0 Clear Row
Age Range: 65 and older	0	0	0 Clear Row
Age Range: Unknown	0	0	0 Clear Row
+ Additional/Alternative Classification/Sub-category			
Maternity			
Classification/Sub-category	Numerator	Denominator	Rate
Age Range: 0-17	0	0	0 Clear Row
Age Range: 18-64	0	0	0 Clear Row
Age Range: 65 and older	0	0	0 Clear Row

Figure 45: Optional Measure Stratification 18

Age Range: Unknown	0	0	0 Clear Row
+ Additional/Alternative Classification/Sub-category			
Mental Health			
Classification/Sub-category	Numerator	Denominator	Rate
Age Range: 0-17	0	0	0 Clear Row
Age Range: 18-64	0	0	0 Clear Row
Age Range: 65 and older	0	0	0 Clear Row
Age Range: Unknown	0	0	0 Clear Row
+ Additional/Alternative Classification/Sub-category			
Surgery			
Classification/Sub-category	Numerator	Denominator	Rate
Age Range: 0-17	0	0	0 Clear Row
Age Range: 18-64	0	0	0 Clear Row
Age Range: 65 and older	0	0	0 Clear Row
Age Range: Unknown	0	0	0 Clear Row
+ Additional/Alternative Classification/Sub-category			
Medicine			
Classification/Sub-category	Numerator	Denominator	Rate
Age Range: 0-17	0	0	0 Clear Row
Age Range: 18-64	0	0	0 Clear Row
Age Range: 65 and older	0	0	0 Clear Row

Figure 46: Optional Measure Stratification 19

News Tasks (6) Records Reports Actions				Applan	
Age Range: Unknown	0	0	0	Clear Row	
+ Additional/Alternative Classification/Sub-category					
<input checked="" type="checkbox"/> Spanish					
Inpatient					
Classification/Sub-category	Numerator	Denominator	Rate		
Age Range: 0-17	0	0	0	Clear Row	
Age Range: 18-64	0	0	0	Clear Row	
Age Range: 65 and older	0	0	0	Clear Row	
Age Range: Unknown	0	0	0	Clear Row	
+ Additional/Alternative Classification/Sub-category					
Maternity					
Classification/Sub-category	Numerator	Denominator	Rate		
Age Range: 0-17	0	0	0	Clear Row	
Age Range: 18-64	0	0	0	Clear Row	
Age Range: 65 and older	0	0	0	Clear Row	
Age Range: Unknown	0	0	0	Clear Row	
+ Additional/Alternative Classification/Sub-category					
Mental Health					
Classification/Sub-category	Numerator	Denominator	Rate		
Age Range: 0-17	0	0	0	Clear Row	

Figure 47: Optional Measure Stratification 20

News Tasks (6) Records Reports Actions				Applan	
Classification/Sub-category	Numerator	Denominator	Rate		
Age Range: 0-17	0	0	0	Clear Row	
Age Range: 18-64	0	0	0	Clear Row	
Age Range: 65 and older	0	0	0	Clear Row	
Age Range: Unknown	0	0	0	Clear Row	
+ Additional/Alternative Classification/Sub-category					
Surgery					
Classification/Sub-category	Numerator	Denominator	Rate		
Age Range: 0-17	0	0	0	Clear Row	
Age Range: 18-64	0	0	0	Clear Row	
Age Range: 65 and older	0	0	0	Clear Row	
Age Range: Unknown	0	0	0	Clear Row	
+ Additional/Alternative Classification/Sub-category					
Medicine					
Classification/Sub-category	Numerator	Denominator	Rate		
Age Range: 0-17	0	0	0	Clear Row	
Age Range: 18-64	0	0	0	Clear Row	
Age Range: 65 and older	0	0	0	Clear Row	
Age Range: Unknown	0	0	0	Clear Row	
+ Additional/Alternative Classification/Sub-category					

Figure 48: Optional Measure Stratification 21

News Tasks (6) **Records** Reports Actions Applan

+ Additional/Alternative Primary Spoken Language(s)

Disability Status SSI

Inpatient

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 0-17	0	0	0	Clear Row
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65 and older	0	0	0	Clear Row
Age Range: Unknown	0	0	0	Clear Row

+ Additional/Alternative Classification/Sub-category

Maternity

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 0-17	0	0	0	Clear Row
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65 and older	0	0	0	Clear Row
Age Range: Unknown	0	0	0	Clear Row

+ Additional/Alternative Classification/Sub-category

Mental Health

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 0-17	0	0	0	Clear Row
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65 and older	0	0	0	Clear Row

Figure 49: Optional Measure Stratification 22

News Tasks (6) **Records** Reports Actions Applan

+ Additional/Alternative Classification/Sub-category

Surgery

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 0-17	0	0	0	Clear Row
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65 and older	0	0	0	Clear Row
Age Range: Unknown	0	0	0	Clear Row

+ Additional/Alternative Classification/Sub-category

Medicine

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 0-17	0	0	0	Clear Row
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65 and older	0	0	0	Clear Row
Age Range: Unknown	0	0	0	Clear Row

+ Additional/Alternative Classification/Sub-category

Non-SSI

Inpatient

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 0-17	0	0	0	Clear Row
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65 and older	0	0	0	Clear Row

Figure 50: Optional Measure Stratification 23

News Tasks (6) Records Reports Actions					Applan
Age Range: 65 and older	0	0	0	Clear Row	
Age Range: Unknown	0	0	0	Clear Row	
+ Additional/Alternative Classification/Sub-category					
Maternity					
Classification/Sub-category	Numerator	Denominator	Rate		
Age Range: 0-17	0	0	0	Clear Row	
Age Range: 18-64	0	0	0	Clear Row	
Age Range: 65 and older	0	0	0	Clear Row	
Age Range: Unknown	0	0	0	Clear Row	
+ Additional/Alternative Classification/Sub-category					
Mental Health					
Classification/Sub-category	Numerator	Denominator	Rate		
Age Range: 0-17	0	0	0	Clear Row	
Age Range: 18-64	0	0	0	Clear Row	
Age Range: 65 and older	0	0	0	Clear Row	
Age Range: Unknown	0	0	0	Clear Row	
+ Additional/Alternative Classification/Sub-category					
Surgery					
Classification/Sub-category	Numerator	Denominator	Rate		
Age Range: 0-17	0	0	0	Clear Row	

Figure 51: Optional Measure Stratification 24

News Tasks (6) Records Reports Actions					Applan
Classification/Sub-category	Numerator	Denominator	Rate		
Age Range: 0-17	0	0	0	Clear Row	
Age Range: 18-64	0	0	0	Clear Row	
Age Range: 65 and older	0	0	0	Clear Row	
Age Range: Unknown	0	0	0	Clear Row	
+ Additional/Alternative Classification/Sub-category					
Medicine					
Classification/Sub-category	Numerator	Denominator	Rate		
Age Range: 0-17	0	0	0	Clear Row	
Age Range: 18-64	0	0	0	Clear Row	
Age Range: 65 and older	0	0	0	Clear Row	
Age Range: Unknown	0	0	0	Clear Row	
+ Additional/Alternative Classification/Sub-category					
+ Additional Disability Status(es)					
<input checked="" type="checkbox"/> Geography <input checked="" type="checkbox"/> Urban					
Inpatient					
Classification/Sub-category	Numerator	Denominator	Rate		
Age Range: 0-17	0	0	0	Clear Row	
Age Range: 18-64	0	0	0	Clear Row	
Age Range: 65 and older	0	0	0	Clear Row	

Figure 52: Optional Measure Stratification 25

News Tasks (6) Records Reports Actions				Applan	
Age Range: Unknown	0	0	0	Clear Row	
+ Additional/Alternative Classification/Sub-category					
Maternity					
Classification/Sub-category	Numerator	Denominator	Rate		
Age Range: 0-17	0	0	0	Clear Row	
Age Range: 18-64	0	0	0	Clear Row	
Age Range: 65 and older	0	0	0	Clear Row	
Age Range: Unknown	0	0	0	Clear Row	
+ Additional/Alternative Classification/Sub-category					
Mental Health					
Classification/Sub-category	Numerator	Denominator	Rate		
Age Range: 0-17	0	0	0	Clear Row	
Age Range: 18-64	0	0	0	Clear Row	
Age Range: 65 and older	0	0	0	Clear Row	
Age Range: Unknown	0	0	0	Clear Row	
+ Additional/Alternative Classification/Sub-category					
Surgery					
Classification/Sub-category	Numerator	Denominator	Rate		
Age Range: 0-17	0	0	0	Clear Row	
Age Range: 18-64	0	0	0	Clear Row	

Figure 53: Optional Measure Stratification 26

News Tasks (6) Records Reports Actions				Applan	
Age Range: 65 and older	0	0	0	Clear Row	
Age Range: Unknown	0	0	0	Clear Row	
+ Additional/Alternative Classification/Sub-category					
Medicine					
Classification/Sub-category	Numerator	Denominator	Rate		
Age Range: 0-17	0	0	0	Clear Row	
Age Range: 18-64	0	0	0	Clear Row	
Age Range: 65 and older	0	0	0	Clear Row	
Age Range: Unknown	0	0	0	Clear Row	
+ Additional/Alternative Classification/Sub-category					
<input checked="" type="checkbox"/> Rural					
Inpatient					
Classification/Sub-category	Numerator	Denominator	Rate		
Age Range: 0-17	0	0	0	Clear Row	
Age Range: 18-64	0	0	0	Clear Row	
Age Range: 65 and older	0	0	0	Clear Row	
Age Range: Unknown	0	0	0	Clear Row	
+ Additional/Alternative Classification/Sub-category					
Maternity					
Classification/Sub-category	Numerator	Denominator	Rate		
Age Range: 0-17	0	0	0	Clear Row	

Figure 54: Optional Measure Stratification 27

News Tasks (6) Records Reports Actions				Applan	
Age Range: 18-64	0	0	0	Clear Row	
Age Range: 65 and older	0	0	0	Clear Row	
Age Range: Unknown	0	0	0	Clear Row	
+ Additional/Alternative Classification/Sub-category					
Mental Health					
Classification/Sub-category	Numerator	Denominator	Rate		
Age Range: 0-17	0	0	0	Clear Row	
Age Range: 18-64	0	0	0	Clear Row	
Age Range: 65 and older	0	0	0	Clear Row	
Age Range: Unknown	0	0	0	Clear Row	
+ Additional/Alternative Classification/Sub-category					
Surgery					
Classification/Sub-category	Numerator	Denominator	Rate		
Age Range: 0-17	0	0	0	Clear Row	
Age Range: 18-64	0	0	0	Clear Row	
Age Range: 65 and older	0	0	0	Clear Row	
Age Range: Unknown	0	0	0	Clear Row	
+ Additional/Alternative Classification/Sub-category					
Medicine					
Classification/Sub-category	Numerator	Denominator	Rate		

Figure 55: Optional Measure Stratification 28

News Tasks (6) Records Reports Actions				Applan	
Age Range: 18-64	0	0	0	Clear Row	
Age Range: 65 and older	0	0	0	Clear Row	
Age Range: Unknown	0	0	0	Clear Row	
+ Additional/Alternative Classification/Sub-category					
Mental Health					
Classification/Sub-category	Numerator	Denominator	Rate		
Age Range: 0-17	0	0	0	Clear Row	
Age Range: 18-64	0	0	0	Clear Row	
Age Range: 65 and older	0	0	0	Clear Row	
Age Range: Unknown	0	0	0	Clear Row	
+ Additional/Alternative Classification/Sub-category					
Surgery					
Classification/Sub-category	Numerator	Denominator	Rate		
Age Range: 0-17	0	0	0	Clear Row	
Age Range: 18-64	0	0	0	Clear Row	
Age Range: 65 and older	0	0	0	Clear Row	
Age Range: Unknown	0	0	0	Clear Row	
+ Additional/Alternative Classification/Sub-category					
Medicine					
Classification/Sub-category	Numerator	Denominator	Rate		

Figure 56: Optional Measure Stratification 29

1.16 Final Comments and Report Documents

Figure 57: Final Comments and Report Documents

1.17 Inpatient Utilization (IU) Path - 2

Figure 58: IU Reporting – No - 1

News Tasks (6) **Records** Reports Actions Applan

Information not collected
Reason *Select all that apply*
 Not collected by provider (hospital/health plan)
 Other
*** Please explain**

Other
*** Please explain**

Small sample size (less than 30)
 Continuous enrollment requirement not met due to start date of SPA
 Other

Enter specific sample size *

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; xlsx; pptx

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

Figure 59: IU Reporting – No - 2

Appendix A: Acronyms

Table 1: Acronyms

Acronym	Literal Translation
HHQM	Health Homes Quality Measure
IU	Inpatient Utilization
PRA	Paper Reduction Act of 1995



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

Medicaid and CHIP Program (MACPro)

HHQM-NFU PRA document

Version 1.0

08/22/2017

Document Number: 226-QSSI-MACPro-PRA-HHQM-NFU-D

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

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1. Health Homes Quality Measures

1.1 Nursing Facility Utilization (NFU) - Path 1

The screenshot shows the 'Records' page for 'Health Homes Quality Measures' with the specific measure 'NV - Health Homes Quality Measure (NV2016HQM002) - 2016'. The 'Related Actions' tab is active. The main section is titled 'Nursing Facility Utilization (NFU)' with the CMS ID 'CMS-10434 OMB 0938-1188'. There are buttons for 'REQUEST TECHNICAL ASSISTANCE', 'CLEAR', and 'VIEW ALL RESPONSES', along with a 'Request System Help' link and a 'View Implementation Guide' link. The question 'Are you reporting on this measure?*' has 'Yes' selected. Under 'Measurement Specification', 'Centers for Medicare and Medicaid Services (CMS)' is selected. Under 'Data Source', 'Administrative Data Only' is checked. The 'From where is the Administrative Data coming?' section has 'Medicaid Management Information System (MMIS)' checked. The 'Date Range' section is partially visible with a note: 'Please define the date range for the reporting period based on the "From" time period as the month and year that corresponds to the beginning period in which utilization took place and please report the "To" time period as the month and year that corresponds to the end period in which utilization took place. Do not report the year in which data were collected from the measure, or the version of HEDIS® used to calculate the measure, both of which may be different from the period corresponding to the utilization of services.'

Figure 1: NFU Reporting - Yes

1.2 Measurement Specification – Path 1

This screenshot is identical to Figure 1, showing the 'Measurement Specification' section of the NFU reporting interface. It highlights the selection of 'Centers for Medicare and Medicaid Services (CMS)' for the measurement specification, 'Administrative Data Only' for the data source, and 'Medicaid Management Information System (MMIS)' for the administrative data source.

Figure 2: Measurement Specification 1

1.3 Measurement Specification – Path 2

News Tasks (6) **Records** Reports Actions Applan

Measurement Specification +/-

Centers for Medicare and Medicaid Services (CMS)

Other

Data Source

Administrative Data Only

Explain *

From where is the Administrative Data coming?
Must select one or more

Medicaid Management Information System (MMIS)

Other

Figure 3: Measurement Specification 2

1.4 Date Range

News Tasks (4) **Records** Reports Actions Applan

Administrative Data

Hybrid (Administrative and Medical Records Data)

Other

Date Range +/-

Please define the date range for the reporting period based on the "From" time period as the month and year that corresponds to the beginning period in which utilization took place and please report the "To" time period as the month and year that corresponds to the end period in which utilization took place. Do not report the year in which data were collected from the measure, or the version of HEDIS® used to calculate the measure, both of which may be different from the period corresponding to the utilization of services.

Start Date

September 2002
Month Year

End Date

October 2009
Month Year

Definition of Population Included in the Measure +/-

Definition of Denominator

Select all that apply:

Figure 4: Date Range

1.5 Definition of Population Included in the Measure

Definition of Population Included in the Measure

Definition of Denominator
Select all that apply

- Denominator includes Medicaid population
- Denominator includes Medicare and Medicaid Dualy-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 *

Figure 5: Denominator Representation 1

1.6 Selection of Delivery Systems

Which delivery systems are represented in the Denominator?
Select all delivery systems that cover the measure-eligible population in your state. For each delivery system selected, report the percentage of the measure-eligible population that is represented in the data reported for the measure and the number of the health plans included (where applicable).

- Fees-for-Service (FFS)
- Primary Care Case Management (PCCM)
- Managed Care Organization / Pre-paid Inpatient Health Plan (MCO/PIHP)
- Integrated Care Models (ICM)
- Other

Percentage of measure-eligible state population represented in data reported *

Percentage of measure-eligible state population represented in data reported *

Number of Health Plans *

Percentage of measure-eligible state population represented in data reported *

Percentage of measure-eligible state population represented in data reported *

Describe *

Percentage of measure-eligible state population represented in data reported *

If applicable, list the number of Health Plans represented

Are all Health Home Providers represented in the denominator?*

Yes

No

Performance Measure

Number of inpatient hospital admissions for ambulatory care sensitive chronic conditions per 100,000 enrollee months for Health Home enrollees age 18 and older. This measure includes adult hospital admissions for diabetes with short-term complications, diabetes with long-term complications, uncontrolled diabetes without complications, diabetes with lower-extremity amputation, chronic obstructive pulmonary disease, asthma, hypertension, heart failure, or angina without a cardiac procedure.

Figure 6: Denominator Representation 2

1.7 Health Home Providers Representation

The screenshot shows the 'Records' tab selected in a navigation bar. The main content area contains a form with the following elements:

- Navigation: News, Tasks (5), **Records**, Reports, Actions.
- User Profile: Applan.
- Question: "Are all Health Home Providers represented in the denominator?" with radio buttons for "Yes" and "No" (selected).
- Text input: "If applicable, list the number of Health Plans represented".
- Text input: "Please explain *".
- Section: "Performance Measure" with a +/- icon.
- Description: "The percentage of Health Home enrollees ages 18 to 74 who had an outpatient visit and whose body mass index (BMI) was documented during the measurement year or the year prior to the measurement year."
 - Checkbox: "Age Range: 18-64" (unchecked).
- Text input: "Please explain why data was not entered for this numerator/denominator/rate set *".
- Character count: "Character count: 0/2000".

Figure 7: Denominator Representation 3

1.8 Performance Measure (Checked all age range) Path -1

The screenshot shows the 'Records' tab selected in a navigation bar. The main content area contains a form with the following elements:

- Navigation: News, Tasks (6), **Records**, Reports, Actions.
- User Profile: Applan.
- Section: "Performance Measure" with a +/- icon.
- Description: "Number of inpatient hospital admissions for ambulatory care sensitive chronic conditions per 100,000 enrollee months for Health Home enrollees age 18 and older. This measure includes adult hospital admissions for diabetes with short-term complications, diabetes with long-term complications, uncontrolled diabetes without complications, diabetes with lower-extremity amputation, chronic obstructive pulmonary disease, asthma, hypertension, heart failure, or angina without a cardiac procedure."
 - Checkbox: "Age Range: 18-64" (checked).
 - Table:

Numerator	Denominator	Rate
0	0	0
 - Checkbox: "Age Range: 65 and older" (checked).
 - Table:

Numerator	Denominator	Rate
0	0	0
 - Checkbox: "Age Range: Total" (checked).
 - Table:

Numerator	Denominator	Rate
0	0	0
- Text input: "Additional Notes/Comments on Measure".
- Character count: "Character count: 0/2000".

Figure 8: Performance Measure 1

1.9 Performance Measure (Checked all age range) Path - 2 Option Yes

Performance Measure

Number of inpatient hospital admissions for ambulatory care sensitive chronic conditions per 100,000 enrollee months for Health Home enrollees age 18 and older. This measure includes adult hospital admissions for diabetes with short-term complications, diabetes with long-term complications, uncontrolled diabetes without complications, diabetes with lower-extremity amputation, chronic obstructive pulmonary disease, asthma, hypertension, heart failure, or angina without a cardiac procedure.

Age Range: 18-64

Numerator	Denominator	Rate
0	0	0

Age Range: 65 and older

Numerator	Denominator	Rate
0	0	0

The option "Denominator includes Medicare and Medicaid Dually-Eligible population" was not selected in the "Definition of Population included in the Measure." Is the Medicare and Medicaid Dually-Eligible population included in this denominator? *

Yes
 No

Age Range: Total

Numerator	Denominator	Rate
0	0	0

Additional Notes/Comments on Measure

Character count: 0/2000

Figure 9: Performance Measure 2

1.10 Performance Measure (Checked all age range) Path – 2 Option No

Performance Measure

Number of inpatient hospital admissions for ambulatory care sensitive chronic conditions per 100,000 enrollee months for Health Home enrollees age 18 and older. This measure includes adult hospital admissions for diabetes with short-term complications, diabetes with long-term complications, uncontrolled diabetes without complications, diabetes with lower-extremity amputation, chronic obstructive pulmonary disease, asthma, hypertension, heart failure, or angina without a cardiac procedure.

Age Range: 18-64

Numerator	Denominator	Rate
0	0	0

Age Range: 65 and older

Numerator	Denominator	Rate
0	0	0

The option "Denominator includes Medicare and Medicaid Dually-Eligible population" was not selected in the "Definition of Population included in the Measure." Is the Medicare and Medicaid Dually-Eligible population included in this denominator? *

Yes
 No

Age Range: Total

Numerator	Denominator	Rate
0	0	0

Additional Notes/Comments on Measure

Character count: 0/2000

Figure 10: Performance Measure 3

1.11 Performance Measure (Checked one age range) Path – 3 (Option Yes)

News Tasks (6) **Records** Reports Actions
Applan

Performance Measure

Number of inpatient hospital admissions for ambulatory care sensitive chronic conditions per 100,000 enrollee months for Health Home enrollees age 18 and older. This measure includes adult hospital admissions for diabetes with short-term complications, diabetes with long-term complications, uncontrolled diabetes without complications, diabetes with lower-extremity amputation, chronic obstructive pulmonary disease, asthma, hypertension, heart failure, or angina without a cardiac procedure.

Age Range: 18-64

Numerator	Denominator	Rate
0	0	0

Age Range: 65 and older

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

Character count: 0/2000

The option "Denominator includes Medicare and Medicaid Dually-Eligible population" was selected in the "Definition of Population included in the Measure" section; however, no data were reported for the population age 65 and older. Are data available for population age 65 and over? *

Yes
 No

Please either:

- enter a N/D/R for this age group.
- return to the "Definition of Population Included in the Measure" section and de-select the option "Denominator includes Medicare and Medicaid Dually-Eligible population", or
- explain below why data were not reported for age 65 and older (for example if the 65 and older group were combined with the 18-64 age group).

"Denominator includes Medicare and Medicaid Dually-Eligible population" was selected, but a numerator, denominator, and rate were not reported for the 65 and older population. Please explain why *

Age Range: Total

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

Figure 11: Performance Measure 4

1.12 Performance Measure (Checked one age range) Path – 3 (Option No)

Performance Measure

Number of inpatient hospital admissions for ambulatory care sensitive chronic conditions per 100,000 enrollee months for Health Home enrollees age 18 and older. This measure includes adult hospital admissions for diabetes with short-term complications, diabetes with long-term complications, uncontrolled diabetes without complications, diabetes with lower-extremity amputation, chronic obstructive pulmonary disease, asthma, hypertension, heart failure, or angina without a cardiac procedure.

Age Range: 18-64

Numerator	Denominator	Rate
0	0	0

Age Range: 65 and older

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

Character count: 0/2000

The option "Denominator includes Medicare and Medicaid Dually-Eligible population" was selected in the "Definition of Population included in the Measure" section; however, no data were reported for the population age 65 and older. Are data available for population age 65 and over? *

Yes
 No

If applicable, please return to the "Definition of Population Included in the Measure" section and de-select the option "Denominator includes Medicare and Medicaid Dually-Eligible population" or provide explanation below.

"Denominator includes Medicare and Medicaid Dually-Eligible population" was not de-selected, please explain why *

Age Range: Total

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

Character count: 0/2000

Additional Notes/Comments on Measure

Figure 12: Performance Measure 5

1.13 Other Performance Measure

Other Performance Measure

Please describe the other methodology used *

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

Clear Row

+ Additional/Other Rate(s)

Additional Notes/Comments on Measure

Combined Rate(s) from Multiple Reporting Units

Did you Combine Rates from Multiple Reporting Units (e.g., Health Home Providers) to Create a Health Home State-Level Rate? *

Yes
 No

Figure 13: Other Performance Measure

1.14 Deviations from Measure Specifications

News Tasks (6) **Records** Reports Actions Applan

Deviations from Measure Specifications

Did your calculation of the measure deviate from the measure specification in any way? *

Yes
 No

Please select and explain the deviation(s)

Nursing facility stay less than 101 days (short-term stay)
Age Range: 18-64

Numerator Explain *

Denominator Explain *

Other Explain *

Age Range: 65 and older

Numerator Explain *

Denominator Explain *

Figure 14: Deviations from Measure Specifications 1

News Tasks (6) **Records** Reports Actions Applan

Denominator Explain *

Other Explain *

Age Range: Total

Numerator Explain *

Denominator Explain *

Other Explain *

Nursing facility stay greater than or equal to 101 days (long-term stay)
Age Range: 18-64

Numerator Explain *

Figure 15: Deviations from Measure Specifications 2

News Tasks (6) **Records** Reports Actions Applan

Nursing facility stay greater than or equal to 101 days (long-term stay)

Age Range: 18-64

- Numerator
- Denominator
- Other

Age Range: 65 and older

- Numerator
- Denominator
- Other

Explain *

Explain *

Explain *

Explain *

Explain *

Figure 16: Deviations from Measure Specifications 3

News Tasks (6) **Records** Reports Actions Applan

Combined Rate(s) from Multiple Reporting Units

- Denominator
- Other

Age Range: Total

- Numerator
- Denominator
- Other

Explain *

Explain *

Explain *

Explain *

Explain *

Did you Combine Data from Multiple Reporting Units (e.g. Health Home Providers) to Create a Health Home State Level Rate? *

Figure 17: Deviations from Measure Specifications 4

1.15 Optional Measure Stratification

News Tasks (6) **Records** Reports Actions Applan

Optional Measure Stratification

If this measure is also reported by additional classifications/sub-categories, e.g. racial, ethnic, sex, language, disability status, or geography, complete the following as applicable.

Check all that apply

Race (Non-Hispanic)

White

Classification/Sub-category	Numerator	Denominator	Rate
Age Range: 18-64	0	0	0 Clear Row
Age Range: 65 and older	0	0	0 Clear Row

+ Additional/Alternative Classification/Sub-category

Black or African American

Classification/Sub-category	Numerator	Denominator	Rate
Age Range: 18-64	0	0	0 Clear Row
Age Range: 65 and older	0	0	0 Clear Row

+ Additional/Alternative Classification/Sub-category

American Indian or Alaska Native

Classification/Sub-category	Numerator	Denominator	Rate
Age Range: 18-64	0	0	0 Clear Row
Age Range: 65 and older	0	0	0 Clear Row

+ Additional/Alternative Classification/Sub-category

Asian

Classification/Sub-category	Numerator	Denominator	Rate
Age Range: 18-64	0	0	0 Clear Row
Age Range: 65 and older	0	0	0 Clear Row

+ Additional/Alternative Classification/Sub-category

Figure 18: Optional Measure Stratification 1

News Tasks (6) **Records** Reports Actions Applan

Asian

Classification/Sub-category	Numerator	Denominator	Rate
Age Range: 18-64	0	0	0 Clear Row
Age Range: 65 and older	0	0	0 Clear Row

+ Additional/Alternative Classification/Sub-category

Native Hawaiian or Other Pacific Islander

Classification/Sub-category	Numerator	Denominator	Rate
Age Range: 18-64	0	0	0 Clear Row
Age Range: 65 and older	0	0	0 Clear Row

+ Additional/Alternative Classification/Sub-category

+ Additional Racets)

Ethnicity

Hispanic or Latino

Classification/Sub-category	Numerator	Denominator	Rate
Age Range: 18-64	0	0	0 Clear Row
Age Range: 65 and older	0	0	0 Clear Row

+ Additional/Alternative Classification/Sub-category

Not Hispanic or Latino

Classification/Sub-category	Numerator	Denominator	Rate
Age Range: 18-64	0	0	0 Clear Row
Age Range: 65 and older	0	0	0 Clear Row

Figure 19: Optional Measure Stratification 2

News Tasks (6) **Records** Reports Actions Applan

+ Additional Ethnicity(ies)

Sex

Male

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65 and older	0	0	0	Clear Row

+ Additional/Alternative Classification/Sub-category

Female

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65 and older	0	0	0	Clear Row

+ Additional/Alternative Classification/Sub-category

Primary Spoken Language

English

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65 and older	0	0	0	Clear Row

+ Additional/Alternative Classification/Sub-category

Spanish

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65 and older	0	0	0	Clear Row

+ Additional/Alternative Classification/Sub-category

Figure 20: Optional Measure Stratification 3

News Tasks (6) **Records** Reports Actions Applan

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65 and older	0	0	0	Clear Row

+ Additional/Alternative Classification/Sub-category

+ Additional Primary Spoken Language(s)

Disability Status

SSI

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65 and older	0	0	0	Clear Row

+ Additional/Alternative Classification/Sub-category

Non-SSI

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65 and older	0	0	0	Clear Row

+ Additional/Alternative Classification/Sub-category

+ Additional Disability Status(es)

Geography

Urban

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65 and older	0	0	0	Clear Row

+ Additional/Alternative Classification/Sub-category

Figure 21: Optional Measure Stratification 4

The screenshot displays the 'Optional Measure Stratification 5' section. It features three identical tables, one for each selected geography: Urban and Rural. Each table has columns for 'Classification/Sub-category', 'Numerator', 'Denominator', and 'Rate'. The 'Rate' column includes a 'Clear Row' button. The tables are currently empty, showing a value of 0 for both age ranges (18-64 and 65 and older). Below the tables are expandable sections for 'Final Comments (Optional)' and 'Report Documents', both currently collapsed.

Figure 22: Optional Measure Stratification 5

1.16 Final Comments and Report Documents

The screenshot shows the 'Final Comments (Optional)' and 'Report Documents' sections. The 'Final Comments (Optional)' section has a text area for entering summary comments. The 'Report Documents' section shows a table for saved documents with columns for Name, Description, Date Created, Updated By, Size, and Type. The table is currently empty, displaying 'No items available'. There are 'UPLOAD', 'DELETE DOCUMENT(S)', and 'SAVE DOCUMENT(S)' buttons.

Figure 23: Final Comments and Report Documents

1.17 Nursing Facility Utilization (NFU) – Path 2

News Tasks (6) **Records** Reports Actions Applan View Implementation Guide

Are you reporting on this measure?*

Yes

No

Please explain why you are not reporting on the measure

Select all that apply (must select at least one)

Service not covered

Population not covered

Data not available

Portion of population not covered*

Entire population not covered

Partial population not covered

* Explain the partial population not covered

Explain why data not available

Select all that apply (must select at least one)

Budget Constraints

Staff Constraints

Data Inconsistencies/Accuracy

* Please explain

Data not submitted by Providers to State

Data source not easily accessible

Reason Select all that apply

Requires medical record review

Requires data linkage, which does not currently exist

Other

* Please explain

Information not collected

Reason Select all that apply

Figure 24: NFU Reporting – No - 1

News Tasks (6) **Records** Reports Actions Applan

Information not collected

Reason Select all that apply

Not collected by provider (hospital/health plan)

Other

* Please explain

Other

* Please explain

Enter specific sample size*

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; xlsx; pptx

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

Figure 25: NFU Reporting – No – 2

Appendix A: Acronyms

Table 1: Acronyms

Acronym	Literal Translation
HHQM	Health Homes Quality Measure
NFU	Nursing Facility Utilization
PRA	Paper Reduction Act of 1995



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

Medicaid and CHIP Program (MACPro)

HHQM-PCR PRA document

Version 1.0

08/22/2017

Document Number: 173-QSSI-MACPro-PRA-HHQM-PCR-D

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

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1. Health Homes Quality Measure

1.1 Plan All-Cause Readmission Rate (PCR) - Path 1

News Tasks (4) **Records** Reports Actions Applan

Plan All-Cause Readmission Rate (PCR)

CMS-10434 OMB 0938-1188

Health Homes Quality Measure - NV - 2016

Request System Help

REQUEST TECHNICAL ASSISTANCE CLEAR VIEW ALL RESPONSES

View Implementation Guide

Are you reporting on this measure? *

Yes
 No

Measurement Specification

National Committee for Quality Assurance (NCQA)/Healthcare Effectiveness Data and Information Set (HEDIS) +/-

Other

Specify version of HEDIS used *
Select Year +/-

HEDIS: Healthcare Effectiveness Data and Information Set

Data Source

Administrative Data Only +/-
 Other

Date Range

Figure 1: PCR Reporting – Yes

1.2 Measure Specification - Path 1

News Tasks (4) **Records** Reports Actions REQUEST TECHNICAL ASSISTANCE CLEAR VIEW ALL RESPONSES Applan View Implementation Guide

Are you reporting on this measure? *
 Yes
 No

Measurement Specification +/-

National Committee for Quality Assurance (NCQA)/Healthcare Effectiveness Data and Information Set (HEDIS) **Specify version of HEDIS used ***
 Other
 Select Year
 HEDIS: Healthcare Effectiveness Data and Information Set

Data Source +/-

Administrative Data Only
 Other

Date Range +/-

Please define the date range for the reporting period based on the "From" time period as the month and year that corresponds to the beginning period in which utilization took place and please report the "To" time period as the month and year that corresponds to the end period in which utilization took place. Do not report the year in which data were collected from the measure, or the version of HEDIS® used to calculate the measure, both of which may be different from the period corresponding to the utilization of services.

Start Date
 Select Month Select Year
 Month Year

End Date
 Select Month Select Year
 Month Year

Definition of Population Included in the Measure +/-

Definition of Denominator
 Select all that apply
 Denominator includes Medicaid population
 Denominator includes Medicare and Medicaid Dually-Eligible population
 Other

Figure 2: Measurement Specification 1

1.3 Measurement Specification - Path 2

News Tasks (4) **Records** Reports Actions Applan View Implementation Guide

Are you reporting on this measure? *
 Yes
 No

Measurement Specification +/-

National Committee for Quality Assurance (NCQA)/Healthcare Effectiveness Data and Information Set (HEDIS) **Explain ***
 Other

Data Source +/-

Administrative Data Only
 Other

Date Range +/-

Please define the date range for the reporting period based on the "From" time period as the month and year that corresponds to the beginning period in which utilization took place and please report the "To" time period as the month and year that corresponds to the end period in which utilization took place. Do not report the year in which data were collected from the measure, or the version of HEDIS® used to calculate the measure, both of which may be different from the period corresponding to the utilization of services.

Start Date

Figure 3: Measurement Specification 2

1.4 Date Range

Character count: 0/2000

Date Range +/-

Please define the date range for the reporting period based on the "From" time period as the month and year that corresponds to the beginning period in which utilization took place and please report the "To" time period as the month and year that corresponds to the end period in which utilization took place. Do not report the year in which data were collected from the measure, or the version of HEDIS® used to calculate the measure, both of which may be different from the period corresponding to the utilization of services.

Start Date

Month: May Year: 2004

End Date

Month: September Year: 2009

Definition of Population Included in the Measure +/-

Definition of Denominator

Select all that apply

- Denominator includes Medicaid population
- Denominator includes Medicare and Medicaid Dually-Eligible population
- Other

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

Figure 4: Date Range

1.5 Definition of Population Included in the Measure

Month: Year:

End Date

Month: Select Month Year: Select Year

Definition of Population Included in the Measure +/-

Definition of Denominator

Select all that apply

- Denominator includes Medicaid population
- Denominator includes Medicare and Medicaid Dually-Eligible population
- Other

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

Yes

No

Specify *

Explain which populations are excluded and why *

Specify total measure-eligible population *

Which delivery systems are represented in the Denominator?

Select all delivery systems that cover the measure-eligible population in your state. For each delivery system selected, report the percentage of the measure-eligible population that is represented in the data reported for the measure and the number of the health plans included (where applicable).

User must select at least one of the following

- Fees-for-Service (FFS)
- Primary Care Case Management (PCCM)
- Managed Care Organization / Pre-paid Inpatient Health Plan (MCO/PIHP)

Figure 5: Definition of Population Included in this Measure 1

1.6 Delivery Systems

Which delivery systems are represented in the Denominator?
 Select all delivery systems that cover the measure-eligible population in your state. For each delivery system selected, report the percentage of the measure-eligible population that is represented in the data reported for the measure and the number of the health plans included (where applicable).

- Fees-for-Service (FFS)
- Primary Care Case Management (PCCM)
- Managed Care Organization / Pre-paid Inpatient Health Plan (MCO/PIHP)
- Integrated Care Models (ICM)
- Other

Percentage of measure-eligible state population represented in data reported *

Percentage of measure-eligible state population represented in data reported *

Number of Health Plans *

Percentage of measure-eligible state population represented in data reported *

Percentage of measure-eligible state population represented in data reported *

Describe *

Percentage of measure-eligible state population represented in data reported *

If applicable, list the number of Health Plans represented

Figure 6: Definition of Population Included in the Measure 2

1.7 Health Home Providers Representation

Are all Health Home Providers represented in the denominator? *

Yes

No

Other Performance Measure

Please describe the other methodology used *

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

+ Additional/Other Rate(s)

Additional Notes/Comments on Measure

Figure 7: Definition of Population Included in the Measure 3

1.8 Performance Measure (Checked all age range) Path - 1

Performance Measure +/-

The percentage of Health Home enrollees ages 18 to 74 who had an outpatient visit and whose body mass index (BMI) was documented during the measurement year or the year prior to the measurement year.

Age Range: 18-64

Numerator	Denominator	Rate
0	0	0

Age Range: 65-74

Numerator	Denominator	Rate
0	0	0

Age Range: Total

Numerator	Denominator	Rate
0	0	0

Additional Notes/Comments on Measure

Character count: 0/2000

[Deviations from Measure Specifications](#)

Figure 8: Performance Measure 1

1.9 Performance Measure (Checked one age range) Path – 2

Performance Measure +/-

The percentage of Health Home enrollees ages 18 to 74 who had an outpatient visit and whose body mass index (BMI) was documented during the measurement year or the year prior to the measurement year.

Age Range: 18-64

Numerator	Denominator	Rate
0	0	0

Age Range: 65-74

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

Character count: 0/2000

The option "Denominator includes Medicare and Medicaid Dually-Eligible population" was selected in the "Definition of Population included in the Measure" section; however, no data were reported for the population age 65 and older. Are data available for population age 65 and over?*

Yes

No

Age Range: Total

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

Figure 9: Performance Measure 2

1.10 Age Range 65 and older, Path 1

Performance Measure

For Health Home enrollees 18 years 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 categories:

- Count of Index Hospital Stays (IHS) (denominator)
- Count of 30-Day Readmissions (numerator)
- Readmissions Rate

Age Range: 18-64

Count of 30-Day Readmissions (Num)	Count of Index Stays (Den)	Readmissions Rate (Num/Den)
0	0	0

Age Range: 65 and older

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

Character count: 0/2000

The option "Denominator includes Medicare and Medicaid Dually-Eligible population" was selected in the "Definition of Population included in the Measure" section; however, no data were reported for the population age 65 and older. Are data available for population age 65 and over? *

Yes
 No

Please either:

- enter a N/D/R for this age group,
- return to the "Definition of Population Included in the Measure" section and de-select the option "Denominator includes Medicare and Medicaid Dually-Eligible population", or
- explain below why data were not reported for age 65 and older (for example if the 65 and older group were combined with the 18-64 age group).

"Denominator includes Medicare and Medicaid Dually-Eligible population" was selected, but a numerator, denominator, and rate were not reported for the 65 and older population. Please explain why *

Age Range: Total

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

Figure 10: Performance Measure 3

1.11 Age Range 65 and older, Path 2

Performance Measure

For Health Home enrollees 18 years 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 categories:

- Count of Index Hospital Stays (IHS) (denominator)
- Count of 30-Day Readmissions (numerator)
- Readmissions Rate

Age Range: 18-64

Count of 30-Day Readmissions (Num)	Count of Index Stays (Den)	Readmissions Rate (Num/Den)
0	0	0

Age Range: 65 and older

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

Character count: 0/2000

The option "Denominator includes Medicare and Medicaid Dually-Eligible population" was selected in the "Definition of Population included in the Measure" section; however, no data were reported for the population age 65 and older. Are data available for population age 65 and over? *

Yes
 No

If applicable, please return to the "Definition of Population Included in the Measure" section and de-select the option "Denominator includes Medicare and Medicaid Dually-Eligible population" or provide explanation below.

"Denominator includes Medicare and Medicaid Dually-Eligible population" was not de-selected, please explain why *

Age Range: Total

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

Figure 11: Performance Measure 4

1.12 Other Performance Measure

News Tasks (4) **Records** Reports Actions Appian

Other Performance Measure

Please describe the other methodology used *

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

+ Additional/Other Rate(s)

Additional Notes/Comments on Measure

Combined Rate(s) from Multiple Reporting Units

Did you Combine Rates from Multiple Reporting Units (e.g., Health Home Providers) to Create a Health Home State-Level Rate? *

Yes

No

Figure 12: Other Performance Measure

1.13 Deviations from Measure Specifications

News Tasks (5) **Records** Reports Actions Appian

Character count: 0/2000

Deviations from Measure Specifications

Did your calculation of the measure deviate from the measure specification in any way? *

Yes

No

Please select and explain the deviation(s)

Age Range: 18-64

Numerator Explain *

Denominator Explain *

Other Explain *

Age Range: 65 and older

Numerator Explain *

Figure 13: Deviations from Measure Specifications 1

Figure 14: Deviations from Measure Specifications 2

1.14 Optional Measurement Stratification

the rates are not weighted

Optional Measure Stratification +/-

If this measure is also reported by additional classifications/sub-categories, e.g. racial, ethnic, sex, language, disability status, or geography, complete the following as applicable.
 Check all that apply

Race (Non-Hispanic)

White

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65-74	0	0	0	Clear Row

+ Additional/Alternative Classification/Sub-category

Black or African American

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65-74	0	0	0	Clear Row

+ Additional/Alternative Classification/Sub-category

American Indian or Alaska Native

Figure 15: Option Measure Stratification 1

News Tasks (5) **Records** Reports Actions Appian

Optional Measure Stratification +/-

If this measure is also reported by additional classifications/sub-categories, e.g. racial, ethnic, sex, language, disability status, or geography, complete the following as applicable.

Check all that apply

Race (Non-Hispanic)

White

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65-74	0	0	0	Clear Row

[Additional/Alternative Classification/Sub-category](#)

Black or African American

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65-74	0	0	0	Clear Row

[Additional/Alternative Classification/Sub-category](#)

American Indian or Alaska Native

Figure 16: Option Measure Stratification 2

News Tasks (5) **Records** Reports Actions Appian

Native Hawaiian or Other Pacific Islander

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65-74	0	0	0	Clear Row

[Additional/Alternative Classification/Sub-category](#)

+ Additional Race(s)

Ethnicity

Hispanic or Latino

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65-74	0	0	0	Clear Row

[Additional/Alternative Classification/Sub-category](#)

Not Hispanic or Latino

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65-74	0	0	0	Clear Row

Figure 17: Option Measure Stratification 3

News Tasks (5) **Records** Reports Actions Appian

Not Hispanic or Latino + Additional/Alternative Classification/Sub-category

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65-74	0	0	0	Clear Row

+ Additional/Alternative Classification/Sub-category

Sex + Additional Ethnicity(ies)

Male

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65-74	0	0	0	Clear Row

+ Additional/Alternative Classification/Sub-category

Female

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 18-64	0	0	0	Clear Row

Figure 18: Option Measure Stratification 4

News Tasks (5) **Records** Reports Actions Appian

Female + Additional/Alternative Classification/Sub-category

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65-74	0	0	0	Clear Row

+ Additional/Alternative Classification/Sub-category

Primary Spoken Language

English

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65-74	0	0	0	Clear Row

+ Additional/Alternative Classification/Sub-category

Spanish

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65-74	0	0	0	Clear Row

Figure 19: Optional Measure Stratification 5

News Tasks (5) **Records** Reports Actions Applan

Age range: 65-74 0 0 0 Row

+ Additional Primary Spoken Language(s)

Disability Status

SSI

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65-74	0	0	0	Clear Row

+ Additional/Alternative Classification/Sub-category

Non-SSI

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65-74	0	0	0	Clear Row

+ Additional/Alternative Classification/Sub-category

+ Additional Disability Status(es)

Geography

Urban

Figure 20: Optional Measure Stratification 6

News Tasks (5) **Records** Reports Actions Applan

+ Additional Disability Status(es)

Geography

Urban

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65-74	0	0	0	Clear Row

+ Additional/Alternative Classification/Sub-category

Rural

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65-74	0	0	0	Clear Row

+ Additional/Alternative Classification/Sub-category

+ Additional Geographies

Final Comments (Optional) +/-

Please enter any summary comments

Figure 21: Optional Measure Stratification 7

1.15 Final Comments and Report Documents

The screenshot shows a web interface with a top navigation bar containing 'News', 'Tasks (4)', 'Records', 'Reports', and 'Actions'. A user profile icon for 'Applan' is in the top right. The main content area is titled 'Final Comments (Optional)' and includes a text input field for 'Please enter any summary comments'. Below this is the 'Report Documents' section, which lists 'Saved Documents' with instructions: 'Maximum documents that can be uploaded for this report: 84', 'Maximum file size: 2MB', and 'Valid file extensions: pdf, ppt, doc, docx, xls, pptx'. A table with columns 'Name', 'Description', 'Date Created', 'Updated By', 'Size', and 'Type' is shown, currently containing 'No items available'. An 'UPLOAD' button is on the left, and 'DELETE DOCUMENT(S)' and 'SAVE DOCUMENT(S)' buttons are on the right. At the bottom, a question asks 'Would you like to validate the core measure data at this time?'.

Figure 22: Final Comments and Report Documents

1.16 Plan All-Cause Readmission Rate (PCR) – Path 2

The screenshot shows a form titled 'Are you reporting on this measure? *' with radio buttons for 'Yes' and 'No' (selected). Below is the section 'Please explain why you are not reporting on the measure' with the instruction 'Select all that apply (must select at least one)'. Checkboxes are selected for 'Service not covered', 'Population not covered', and 'Data not available'. The 'Portion of population not covered *' section has radio buttons for 'Entire population not covered' and 'Partial population not covered' (selected), followed by a text input field for 'Explain the partial population not covered'. The 'Explain why data not available' section has checkboxes for 'Budget Constraints', 'Staff Constraints', and 'Data Inconsistencies/Accuracy' (all selected), followed by a text input field for '* Please explain'. At the bottom, checkboxes are selected for 'Data not submitted by Providers to State' and 'Data source not easily accessible'. A 'View Implementation Guide' link is in the top right.

Figure 23: PCR Reporting – No - 1

The screenshot shows a web application interface with a top navigation bar containing 'News', 'Tasks (5)', 'Records' (highlighted), 'Reports', and 'Actions'. A user profile icon for 'Appian' is in the top right. The main content area contains several sections of checkboxes and text boxes:

- Data not submitted by Providers to State
- Data source not easily accessible
- Reason** *Select all that apply*
 - Requires medical record review
 - Requires data linkage, which does not currently exist
 - Other
- * Please explain** [Text box]
- Information not collected
- Reason** *Select all that apply*
 - Not collected by provider (hospital/health plan)
 - Other
- * Please explain** [Text box]
- Other
- * Please explain** [Text box]

Figure 24: PCR Reporting – No - 2

The screenshot shows the same web application interface. The main content area contains:

- Small sample size (less than 30)
- Continuous enrollment requirement not met due to start date of SPA
- Other
- * Please explain** [Text box]
- Enter specific sample size *** [Text box]
- Explain other reason why data not reported *** [Text box]
- 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; xlsx; pptx
- | <input type="checkbox"/> | Name | Description | Date Created | Updated By | Size | Type |
|--------------------------|------|-------------|--------------|------------|------|------|
| | | | | | | |

Figure 25: PCR Reporting – No – 3

Appendix A: Acronyms

Table 1: Acronyms

Acronym	Literal Translation
HHQM	Health Homes Quality Measure
PCR	Plan All-Cause Readmission Rate
PRA	Paper Reduction Act of 1995



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

Medicaid and CHIP Program (MACPro)

HHQM-PQI92 PRA document

Version 1.0

08/22/2017

Document Number: 223-QSSI-MACPro-PRA-HHQM-PQ192-D

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

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1.9 Performance Measure (Checked all age range) Path - 2 Option Yes	5
1.10 Performance Measure (Checked all age range) Path – 2 Option No	5
1.11 Performance Measure (Checked one age range) Path – 3 (Option Yes)	6
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1. Health Homes Quality Measures

1.1 Preventive Quality Chronic Composite (PQI92) - Path 1

The screenshot shows the 'Prevention Quality Chronic Composite (PQI92)' reporting page. The navigation bar includes 'News', 'Tasks (6)', 'Records', 'Reports', and 'Actions'. The page title is 'Prevention Quality Chronic Composite (PQI92)' with the identifier 'CMS-10434 OMB 0938-1188'. Below the title, it specifies 'Health Homes Quality Measure - NV - 2016'. There are buttons for 'REQUEST TECHNICAL ASSISTANCE', 'CLEAR', and 'VIEW ALL RESPONSES', along with a 'Request System Help' link and a 'View Implementation Guide' link. The question 'Are you reporting on this measure?*' has the 'Yes' radio button selected. Under 'Measurement Specification', the 'Agency for Healthcare Research and Quality (AHRQ)' radio button is selected. Under 'Data Source', 'Administrative Data Only' and 'Other' checkboxes are present. Under 'Date Range', there are dropdown menus for 'Start Date' and 'End Date', each with 'Select Month' and 'Select Year' options.

Figure 1: PQI92 Reporting - Yes

1.2 Measurement Specification – Path 1

This screenshot is identical to Figure 1, showing the 'Prevention Quality Chronic Composite (PQI92)' reporting page. In this view, the 'Measurement Specification' section is expanded, showing the 'Agency for Healthcare Research and Quality (AHRQ)' radio button selected. The 'Data Source' section shows 'Administrative Data Only' and 'Other' checkboxes. The 'Date Range' section shows the 'Start Date' and 'End Date' dropdown menus.

Figure 2: Measurement Specification 1

1.3 Measurement Specification – Path 2

News Tasks (6) **Records** Reports Actions Applan

Measurement Specification +/-

Agency for Healthcare Research and Quality (AHRQ)
 Other

Explain *

Data Source +/-

Administrative Data Only
 Other

Date Range +/-

Please define the date range for the reporting period based on the "From" time period as the month and year that corresponds to the beginning period in which utilization took place and please report the "To" time period as the month and year that corresponds to the end period in which utilization took place. Do not report the year in which data were collected from the measure, or the version of HEDIS® used to calculate the measure, both of which may be different from the period corresponding to the utilization of services.

Figure 3: Measurement Specification 1

1.4 Date Range

News Tasks (4) **Records** Reports Actions Applan

Administrative Data
 Hybrid (Administrative and Medical Records Data)
 Other

Date Range +/-

Please define the date range for the reporting period based on the "From" time period as the month and year that corresponds to the beginning period in which utilization took place and please report the "To" time period as the month and year that corresponds to the end period in which utilization took place. Do not report the year in which data were collected from the measure, or the version of HEDIS® used to calculate the measure, both of which may be different from the period corresponding to the utilization of services.

Start Date

September 2002
 Month Year

End Date

October 2009
 Month Year

Definition of Population Included in the Measure +/-

Definition of Denominator

Select all that apply.

Figure 4: Date Range

1.5 Definition of Population Included in the Measure

Definition of Population Included in the Measure

Definition of Denominator
Select all that apply

- Denominator includes Medicaid population
- Denominator includes Medicare and Medicaid Dualy-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 *

Figure 5: Denominator Representation 1

1.6 Selection of Delivery Systems

Which delivery systems are represented in the Denominator?
Select all delivery systems that cover the measure-eligible population in your state. For each delivery system selected, report the percentage of the measure-eligible population that is represented in the data reported for the measure and the number of the health plans included (where applicable).

- Fees-for-Service (FFS)
- Primary Care Case Management (PCCM)
- Managed Care Organization / Pre-paid Inpatient Health Plan (MCO/PIHP)
- Integrated Care Models (ICM)
- Other

Percentage of measure-eligible state population represented in data reported *

Percentage of measure-eligible state population represented in data reported *

Number of Health Plans *

Percentage of measure-eligible state population represented in data reported *

Percentage of measure-eligible state population represented in data reported *

Describe *

Percentage of measure-eligible state population represented in data reported *

If applicable, list the number of Health Plans represented

Are all Health Home Providers represented in the denominator?*

Yes

No

Performance Measure

Number of inpatient hospital admissions for ambulatory care sensitive chronic conditions per 100,000 enrollee months for Health Home enrollees age 18 and older. This measure includes adult hospital admissions for diabetes with short-term complications, diabetes with long-term complications, uncontrolled diabetes without complications, diabetes with lower-extremity amputation, chronic obstructive pulmonary disease, asthma, hypertension, heart failure, or angina without a cardiac procedure.

Figure 6: Denominator Representation 2

1.7 Health Home Providers Representation

News Tasks (5) **Records** Reports Actions Applan

If applicable, list the number of Health Plans represented

Are all Health Home Providers represented in the denominator? *

Yes

No

Performance Measure +/-

The percentage of Health Home enrollees ages 18 to 74 who had an outpatient visit and whose body mass index (BMI) was documented during the measurement year or the year prior to the measurement year.

Age Range: 18-64

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

Character count: 0/2000

Figure 7: Denominator Representation 3

1.8 Performance Measure (Checked all age range) Path -1

News Tasks (6) **Records** Reports Actions Applan

Performance Measure +/-

Number of inpatient hospital admissions for ambulatory care sensitive chronic conditions per 100,000 enrollee months for Health Home enrollees age 18 and older. This measure includes adult hospital admissions for diabetes with short-term complications, diabetes with long-term complications, uncontrolled diabetes without complications, diabetes with lower-extremity amputation, chronic obstructive pulmonary disease, asthma, hypertension, heart failure, or angina without a cardiac procedure.

Age Range: 18-64

Numerator	Denominator	Rate
0	0	0

Age Range: 65 and older

Numerator	Denominator	Rate
0	0	0

Age Range: Total

Numerator	Denominator	Rate
0	0	0

Additional Notes/Comments on Measure

Character count: 0/2000

Figure 8: Performance Measure 1

1.9 Performance Measure (Checked all age range) Path - 2 Option Yes

Performance Measure

Number of inpatient hospital admissions for ambulatory care sensitive chronic conditions per 100,000 enrollee months for Health Home enrollees age 18 and older. This measure includes adult hospital admissions for diabetes with short-term complications, diabetes with long-term complications, uncontrolled diabetes without complications, diabetes with lower-extremity amputation, chronic obstructive pulmonary disease, asthma, hypertension, heart failure, or angina without a cardiac procedure.

Age Range: 18-64

Numerator	Denominator	Rate
0	0	0

Age Range: 65 and older

Numerator	Denominator	Rate
0	0	0

The option "Denominator includes Medicare and Medicaid Dually-Eligible population" was not selected in the "Definition of Population included in the Measure." Is the Medicare and Medicaid Dually-Eligible population included in this denominator? *

Yes
 No

Age Range: Total

Numerator	Denominator	Rate
0	0	0

Additional Notes/Comments on Measure

Character count: 0/2000

Figure 9: Performance Measure 2

1.10 Performance Measure (Checked all age range) Path – 2 Option No

Performance Measure

Number of inpatient hospital admissions for ambulatory care sensitive chronic conditions per 100,000 enrollee months for Health Home enrollees age 18 and older. This measure includes adult hospital admissions for diabetes with short-term complications, diabetes with long-term complications, uncontrolled diabetes without complications, diabetes with lower-extremity amputation, chronic obstructive pulmonary disease, asthma, hypertension, heart failure, or angina without a cardiac procedure.

Age Range: 18-64

Numerator	Denominator	Rate
0	0	0

Age Range: 65 and older

Numerator	Denominator	Rate
0	0	0

The option "Denominator includes Medicare and Medicaid Dually-Eligible population" was not selected in the "Definition of Population included in the Measure." Is the Medicare and Medicaid Dually-Eligible population included in this denominator? *

Yes
 No

Age Range: Total

Numerator	Denominator	Rate
0	0	0

Additional Notes/Comments on Measure

Character count: 0/2000

Figure 10: Performance Measure 3

1.11 Performance Measure (Checked one age range) Path – 3 (Option Yes)

News Tasks (6) **Records** Reports Actions
Applan

Performance Measure

Number of inpatient hospital admissions for ambulatory care sensitive chronic conditions per 100,000 enrollee months for Health Home enrollees age 18 and older. This measure includes adult hospital admissions for diabetes with short-term complications, diabetes with long-term complications, uncontrolled diabetes without complications, diabetes with lower-extremity amputation, chronic obstructive pulmonary disease, asthma, hypertension, heart failure, or angina without a cardiac procedure.

Age Range: 18-64

Numerator	Denominator	Rate
0	0	0

Age Range: 65 and older

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

Character count: 0/2000

The option "Denominator includes Medicare and Medicaid Dually-Eligible population" was selected in the "Definition of Population included in the Measure" section; however, no data were reported for the population age 65 and older. Are data available for population age 65 and over? *

Yes
 No

Please either:

1. enter a N/D/R for this age group.
2. return to the "Definition of Population Included in the Measure" section and de-select the option "Denominator includes Medicare and Medicaid Dually-Eligible population", or
3. explain below why data were not reported for age 65 and older (for example if the 65 and older group were combined with the 18-64 age group).

"Denominator includes Medicare and Medicaid Dually-Eligible population" was selected, but a numerator, denominator, and rate were not reported for the 65 and older population. Please explain why *

Age Range: Total

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

Figure 11: Performance Measure 4

1.12 Performance Measure (Checked one age range) Path – 3 (Option No)

Performance Measure

Number of inpatient hospital admissions for ambulatory care sensitive chronic conditions per 100,000 enrollee months for Health Home enrollees age 18 and older. This measure includes adult hospital admissions for diabetes with short-term complications, diabetes with long-term complications, uncontrolled diabetes without complications, diabetes with lower-extremity amputation, chronic obstructive pulmonary disease, asthma, hypertension, heart failure, or angina without a cardiac procedure.

Age Range: 18-64

Numerator	Denominator	Rate
0	0	0

Age Range: 65 and older

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

Character count: 0/2000

The option "Denominator includes Medicare and Medicaid Dually-Eligible population" was selected in the "Definition of Population included in the Measure" section; however, no data were reported for the population age 65 and older. Are data available for population age 65 and over? *

Yes
 No

If applicable, please return to the "Definition of Population Included in the Measure" section and de-select the option "Denominator includes Medicare and Medicaid Dually-Eligible population" or provide explanation below.

"Denominator includes Medicare and Medicaid Dually-Eligible population" was not de-selected, please explain why *

Age Range: Total

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

Character count: 0/2000

Additional Notes/Comments on Measure

Figure 12: Performance Measure 5

1.13 Other Performance Measure

Other Performance Measure

Please describe the other methodology used *

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

Clear Row

+ Additional/Other Rates()

Additional Notes/Comments on Measure

Combined Rate(s) from Multiple Reporting Units

Did you Combine Rates from Multiple Reporting Units (e.g., Health Home Providers) to Create a Health Home State-Level Rate? *

Yes
 No

Figure 13: Other Performance Measure

1.14 Deviations from Measure Specifications

The screenshot shows a web interface with a dark blue header containing navigation links: 'News', 'Tasks (5)', 'Records' (highlighted), 'Reports', and 'Actions'. On the right of the header is a user profile icon and the name 'Applan'. Below the header, the page title 'Deviations from Measure Specifications' is displayed. The main content area contains a form with the following elements:

- A question: 'Did your calculation of the measure deviate from the measure specification in any way? *' with radio buttons for 'Yes' (selected) and 'No'.
- A prompt: 'Please select and explain the deviation(s)'
- A section for 'Age Range: 18-64' with three checked checkboxes: 'Numerator', 'Denominator', and 'Other'.
- Three text input fields, each labeled 'Explain *', corresponding to the selected categories.
- A small '+/-' icon in the top right corner of the form area.

Figure 14: Deviations from Measure Specifications 1

The screenshot shows a similar web interface to Figure 14. The header and navigation are identical. The main content area contains a form for the 'Age Range: 65 and older' category. The form includes:

- A section for 'Age Range: 65 and older' with three checked checkboxes: 'Numerator', 'Denominator', and 'Other'.
- Three text input fields, each labeled 'Explain *', corresponding to the selected categories.
- A section for 'Age Range: Total' with one checked checkbox: 'Numerator'.

Figure 15: Deviations from Measure Specifications 2

News Tasks (5) **Records** Reports Actions Applan

Age Range: Total

Numerator

Denominator

Other

Explain *

Explain *

Explain *

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

Did you Combine Rates from Multiple Reporting Units (e.g., Health Home Providers) to Create a Health Home 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

Figure 16: Deviations from Measure Specifications 3

1.15 Optional Measure Stratification

News Tasks (6) **Records** Reports Actions Applan

Optional Measure Stratification +/-

If this measure is also reported by additional classifications/sub-categories, e.g. racial, ethnic, sex, language, disability status, or geography, complete the following as applicable.

Check all that apply

Race (Non-Hispanic)

White

Classification/Sub-category	Numerator	Denominator	Rate
Age Range: 18-64	0	0	0 <small>Clear Row</small>
Age Range: 65 and older	0	0	0 <small>Clear Row</small>

+ Additional/Alternative Classification/Sub-category

Black or African American

Classification/Sub-category	Numerator	Denominator	Rate
Age Range: 18-64	0	0	0 <small>Clear Row</small>
Age Range: 65 and older	0	0	0 <small>Clear Row</small>

+ Additional/Alternative Classification/Sub-category

American Indian or Alaska Native

Classification/Sub-category	Numerator	Denominator	Rate
Age Range: 18-64	0	0	0 <small>Clear Row</small>
Age Range: 65 and older	0	0	0 <small>Clear Row</small>

+ Additional/Alternative Classification/Sub-category

Asian

Classification/Sub-category	Numerator	Denominator	Rate
			<small>Clear</small>

Figure 17: Optional Measure Stratification 1

News Tasks (6) **Records** Reports Actions Applan

Asian

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65 and older	0	0	0	Clear Row

+ Additional/Alternative Classification/Sub-category

Native Hawaiian or Other Pacific Islander

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65 and older	0	0	0	Clear Row

+ Additional/Alternative Classification/Sub-category

+ Additional Races(s)

Ethnicity

Hispanic or Latino

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65 and older	0	0	0	Clear Row

+ Additional/Alternative Classification/Sub-category

Not Hispanic or Latino

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65 and older	0	0	0	Clear Row

Figure 18: Optional Measure Stratification 2

News Tasks (6) **Records** Reports Actions Applan

+ Additional Ethnicity(ies)

Sex

Male

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65 and older	0	0	0	Clear Row

+ Additional/Alternative Classification/Sub-category

Female

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65 and older	0	0	0	Clear Row

+ Additional/Alternative Classification/Sub-category

Primary Spoken Language

English

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65 and older	0	0	0	Clear Row

+ Additional/Alternative Classification/Sub-category

Spanish

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 18-64	0	0	0	Clear Row

Figure 19: Optional Measure Stratification 3

News Tasks (6) **Records** Reports Actions Applan

Age Range: 18-64	0	0	0	Clear Row
Age Range: 65 and older	0	0	0	Clear Row

+ Additional/Alternative Classification/Sub-category

+ Additional Primary Spoken Languages(s)

Disability Status

SSI

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65 and older	0	0	0	Clear Row

+ Additional/Alternative Classification/Sub-category

Non-SSI

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65 and older	0	0	0	Clear Row

+ Additional/Alternative Classification/Sub-category

+ Additional Disability Status(es)

Geography

Urban

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65 and older	0	0	0	Clear Row

+ Additional/Alternative Classification/Sub-category

Figure 20: Optional Measure Stratification 4

News Tasks (6) **Records** Reports Actions Applan

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65 and older	0	0	0	Clear Row

+ Additional/Alternative Classification/Sub-category

+ Additional Disability Status(es)

Geography

Urban

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65 and older	0	0	0	Clear Row

+ Additional/Alternative Classification/Sub-category

Rural

Classification/Sub-category	Numerator	Denominator	Rate	
Age Range: 18-64	0	0	0	Clear Row
Age Range: 65 and older	0	0	0	Clear Row

+ Additional/Alternative Classification/Sub-category

+ Additional Geographies

Final Comments (Optional) +/-

Please enter any summary comments

Figure 21: Optional Measure Stratification 5

1.16 Final Comments and Report Documents

Figure 22: Final Comments and Report Documents

1.17 Prevention Quality Chronic Composite (PQI92) – Path 2

Figure 23: PQI92 Reporting – No - 1

The screenshot displays a web application interface for PQI92 Reporting. At the top, there is a navigation bar with tabs for 'News', 'Tasks (6)', 'Records', 'Reports', and 'Actions'. A user profile icon labeled 'Applan' is in the top right corner. The main content area contains several sections:

- Information not collected:** A checked checkbox with a 'Reason' dropdown menu. The dropdown is open, showing 'Not collected by provider (hospital/health plan)' and 'Other' (checked). Below this is a text input field labeled '* Please explain'.
- Other:** A checked checkbox with a text input field labeled '* Please explain'.
- Small sample size (less than 30):** A checked checkbox.
- Continuous enrollment requirement not met due to start date of SPA:** A checked checkbox.
- Other:** A checked checkbox.
- Enter specific sample size *:** A text input field.
- Explain other reason why data not reported *:** A large text input field.

Below these sections is a 'Report Documents' section with a '+/-' icon. Underneath, there is a 'Saved Documents' section with a list of instructions:

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

At the bottom, there is a table with columns: Name, Description, Date Created, Updated By, Size, and Type. The table is currently empty, with the text 'No items available' centered below it.

Figure 24: PQI92 Reporting – No - 2

Appendix A: Acronyms

Table 1: Acronyms

Acronym	Literal Translation
HHQM	Health Homes Quality Measure
PQI92	Preventive Quality Chronic Composite
PRA	Paper Reduction Act of 1995



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

Medicaid and CHIP Program (MACPro)

HHQM – Health Homes State-Specific Measures PRA document

Version 1.0

08/22/2017

Document Number: 230-QSSI-MACPro-PRA-HHQM-SSGM-D

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

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1. Health Homes Quality Measure

1.1 Health Homes State-Specific Goals and Measures

News Tasks (7) **Records** Reports Actions Appian

Health Homes State-Specific Goals and Measures

CMS-10434 OMB 0938-1188 Request System Help

Fiscal Year
2016

Goals

In addition to the CMS recommended core and utilization measures, identify the goals and define the measures the State will use to assess its Health Homes model of service delivery

<input type="checkbox"/>	Name	Description
No items available		

ADD GOAL

Add new goal

Name

Description

Figure 1: Goals

1.2 Related Measures

News Tasks (7) **Records** Reports Actions Appian

Goals

In addition to the CMS recommended core and utilization measures, identify the goals and define the measures the State will use to assess its Health Homes model of service delivery

<input checked="" type="checkbox"/>	Name	Description
<input checked="" type="checkbox"/>	43t	wertgrew

ADD GOAL **DELETE GOAL**

Modify Goal

Name
43t

Description
wertgrew

Related Measures

You may define up to five core measures

<input type="checkbox"/>	Name	Description	Status
No items available			

ADD MEASURE **SAVE GOAL**

Figure 2: Related Measures

1.3 Performance Measure Path 1

Measure Details +/-

* Name of measure:

* Description of measure:
Character count: 0/4000

Performance Measure +/-

Please describe the methodology used *

Performance measure applies to all ages *

Yes
 No

Numerator	Denominator	Rate
<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>

Additional Notes/Comments on Measure

Figure 3: Performance Measure 1

1.4 Performance Measure Path 2

Performance Measure +/-

Please describe the methodology used *

Performance measure applies to all ages *

Yes
 No

Indicate what age ranges are used for this measure

Description of numerator and denominator	Numerator	Denominator	Rate	
<input type="text"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	Clear Row

Add Numerator/Denominator/Rate set(s)

Total

Numerator	Denominator	Rate
<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>

Additional Notes/Comments on Measure

Figure 4: Performance Measure 2

1.5 Final Comments and Upload Documents

Final Comments (Optional) +/-

Please enter any summary comments

Upload Documents +/-

Saved Documents

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

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

Please upload any supporting document(s):

UPLOAD

DELETE DOCUMENT(S) SAVE DOCUMENT(S)

Figure 5: Final Comments and Upload Documents

Appendix A: Acronyms

Table 1: Acronyms

Acronym	Literal Translation
HHQM	Health Homes Quality Measure
PRA	Paper Reduction Act of 1995



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

Medicaid and CHIP Program (MACPro)

HHQM - Hybrid Data Source PRA document

Version 1.0

08/21/2017

Document Number: 202-QSSI-MACPro-PRA-HHQM-HH4b-D

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

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1. Data Source

1.1 Hybrid Data Source Screen

The screenshot displays the 'Hybrid Data Source Screen' within a web application. At the top, a navigation bar includes 'News', 'Tasks (5)', 'Records' (highlighted), 'Reports', and 'Actions'. A user profile icon for 'Applan' is visible in the top right. The main content area is divided into two columns. The left column contains two checked checkboxes: 'Hybrid (Administrative and Medical Records Data)' and 'Other'. Below these is a 'Date Range' label. The right column contains two sections. The first section, 'From where is the Administrative Data coming?', has a text input field with a 'Character count: 0/2000' label below it. Below this is a sub-section 'Must select one or more' with two checked checkboxes: 'Medicaid Management Information System (MMIS)' and 'Other'. A '* Specify' label is followed by another text input field with a 'Character count: 0/2000' label. The second section, 'From where is the Medical Records coming?', has a sub-section 'Must select only one' with three radio button options: 'Electronic Health Record (EHR) Data' (selected), 'Paper', and 'Both (EHR and Paper)'. Below this is a '* Specify' label followed by a text input field with a 'Character count: 0/2000' label. A '+/-' icon is located at the bottom right of the form area.

Figure 1: Hybrid Data

Appendix A: Acronyms

Table 1: Acronyms

Acronym	Literal Translation
HHQM	Health Homes Quality Measure
PRA	Paper Reduction Act of 1995



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

Medicaid and CHIP Program (MACPro)

HHQM - Hybrid/EHR PRA document

Version 1.0

08/21/2017

Document Number: 203-QSSI-MACPro-PRA-HHQM-HH4d-D

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

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1. Data Source

1.1 Hybrid and/or EHR Screen

The screenshot displays a web interface for configuring data sources. At the top, a navigation bar includes 'News', 'Tasks (5)', 'Records' (highlighted), 'Reports', and 'Actions'. A user profile icon and the name 'Appian' are visible in the top right. The main content area is titled 'Data Source' and contains the following elements:

- A checkbox labeled 'Hybrid (Administrative and Medical Records Data)' which is checked.
- A checkbox labeled 'Electronic Health Record (EHR) Data' which is checked.
- A section titled 'From where is the Administrative Data coming?' with the instruction 'Must select one or more'. It contains two checked checkboxes: 'Medicaid Management Information System (MMIS)' and 'Other'. Below this is a text input field with the label '* Specify' and a character count of '0/2000'.
- A section titled 'From where is the Medical Records coming?' with the instruction 'Must select only one'. It contains three radio button options: 'Electronic Health Record (EHR) Data' (selected), 'Paper', and 'Both (EHR and Paper)'.

Figure 1: Hybrid and/or HER

Appendix A: Acronyms

Table 1: Acronyms

Acronym	Literal Translation
HHQM	Health Homes Quality Measure
PRA	Paper Reduction Act of 1995



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

Medicaid and CHIP Program (MACPro)

HHQM - If Data Not Reported PRA document

Version 1.0

08/21/2017

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1. Administrative Questions and Cost Saving Data

1.1 If Data not Reported Screen

The screenshot shows a web application interface. At the top, there is a navigation bar with tabs for 'News', 'Tasks (5)', 'Records', 'Reports', and 'Actions' (which is highlighted). A user profile icon and the name 'Applan' are visible in the top right corner. Below the navigation bar, there are two rows of input fields for 'Managed care' and 'Other'. The main content area is titled 'Report Documents' and includes a section for 'Saved Documents' with a list of instructions: 'Maximum documents that can be uploaded for this report: 84', 'Maximum file size : 2MB', and 'Valid file extensions: pdf; ppt; doc; docx; xls; xlsx; pptx'. Below this is a table with columns: Name, Description, Date Created, Updated By, Size, and Type. The table is currently empty, displaying 'No items available'. There is an 'UPLOAD' button with a document icon, and 'DELETE DOCUMENT(S)' and 'SAVE DOCUMENT(S)' buttons. A red error message box at the bottom states: 'Please correct the issues in the Admin Questions and Cost Savings Data Screen before proceeding'. At the very bottom, there are three buttons: 'EXIT', 'BEGIN REPORTING', and 'REQUEST STATE POC REVIEW'. A 'PRA Disclosure Statement' is also present, providing legal information about the data collection process.

Figure 1: If Data not Reported

Appendix A: Acronyms

Table 1: Acronyms

Acronym	Literal Translation
HHQM	Health Homes Quality Measure
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Centers for Medicare & Medicaid Services
CMS eXpedited Life Cycle (XLC)

Medicaid and CHIP Program (MACPro)

HHQM - Technical Assistance PRA document

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Figure 3: TA Request 3 2

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Table 1: Acronyms 3

1. HH3 Technical Assistance

1.1 Technical Assistance Request Screen – Path 1

The screenshot shows a web application interface with a dark blue header bar. The header contains navigation tabs: 'News', 'Tasks (5)', 'Records' (which is highlighted with a yellow underline), 'Reports', and 'Actions'. On the right side of the header, there is a user profile icon and the name 'Applan'. Below the header, the main content area is white. At the top of this area, there are two radio buttons: 'Yes' (selected) and 'No'. Below this is a section titled 'Technical Assistance' in blue. The text under this section explains that technical assistance is available through a mailbox for questions about core set reporting and technical specifications. It also mentions that a 'Consolidated Implementation Guide' and a 'Technical Specifications and Resource Manual' are available. A bolded question asks: 'Do you have a Technical assistance request for the Technical assistance and Analytic Support mailbox related to the measure in the current year? *'. Below this question are two radio buttons: 'Yes' (selected) and 'No'. The form then has several fields: 'From' (with the value 'NV SEDItone <jchoudhary@qssinc.com>'), 'CC' (an empty text box), 'Subject' (with the value 'NV-2016-HHQM-Adult Body Mass Index Assessment'), and 'Message *' (a large empty text area). At the bottom left of the message area, it says 'Character count: 0/4000'.

Figure 1: TA Request 1

News Tasks (5) **Records** Reports Actions Applan

Yes
 No

From
 NV SEDITone <jchoudhary@qssinc.com>

cc

Multiple email ids separated by comma can be entered

Subject
 NV-2016-HHQM-Adult Body Mass Index Assessment

Additional text in subject

Message *

Character count: 0/4000

Do you want Technical Assistance with reporting this measure in a future year? *
 Yes
 No

SEND REQUEST

Measurement Specification

Figure 2: TA Request 2

1.2 Technical Assistance Request Screen – Path 2

News Tasks (5) **Records** Reports Actions Applan

Request System Help
CLOSE TECHNICAL ASSISTANCE CLEAR VIEW ALL RESPONSES
[View Implementation Guide](#)

Are you reporting on this measure? *
 Yes
 No

▲ 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
 Yes must be selected in order to submit Technical Assistance Request

Do you want Technical Assistance with reporting this measure in a future year? *
 Yes
 No

SEND REQUEST

Measurement Specification

National Committee for Quality Assurance (NCQA)/Healthcare Effectiveness Data and Information Set (HEDIS)
 Other

Specify version of HEDIS used *

HEDIS: Healthcare Effectiveness Data and Information Set

Data Source

Figure 3: TA Request 3

Appendix A: Acronyms

Table 1: Acronyms

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

Medicaid and CHIP Program (MACPro)
HHQM - Combined Rate(s) PRA document

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Table 1: Acronyms 2

1. Health Homes Quality Measures

1.1 HH5a- Combined Rate(s) from Multiple Reporting Units Screen

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

Did you Combine Rates from Multiple Reporting Units (e.g., Health Home Providers) to Create a Health Home 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

The rates are not weighted

Optional Measure Stratification +/-

If this measure is also reported by additional classifications/sub-categories, e.g. racial, ethnic, sex, language, disability status, or geography, complete the following as applicable.

Check all that apply

Race (Non-Hispanic)

Ethnicity

Sex

Primary Spoken Language

Disability Status

Geography

Final Comments (Optional) +/-

Placeholder for final comments

Figure 1: Combined Rate(s) from Multiple Reporting Units

Appendix A: Acronyms

Table 1: Acronyms

Acronym	Literal Translation
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