

## Measures for the MaineCare Utilization Review Report\*

| Measure   | Child (C), Adult (A) <sup>†</sup> | Look Back Period <sup>‡</sup> | Eligibility Required <sup>§</sup> | Used by HEDIS |
|---|-----------------------------------|-------------------------------|-----------------------------------|---------------|
| <p><b>1. Unduplicated MaineCare Members Served per Period (Access/Panel Size):</b> The number of MaineCare members enrolled at a service location (SL) during the reporting period.</p> <p><b>**ASSIGNMENT ALGORITHM HAS CHANGED**</b></p> <p>In the new claims processing system, MIHMS, PCCM members are enrolled with a rendering provider (PCP) or an FQHC/RHC provider. Members that are enrolled with an FQHC/RHC are enrolled with the SL where they were assigned last during the reporting period. Member who are enrolled with a rendering provider are first assigned to the PCP they were enrolled with last during the reporting period. The PCP is assigned to the SL where most of their MaineCare services were performed for the reporting period. All members assigned to those PCPs are then attributed to that SL.</p> <p>Members who are not enrolled in PCCM, Fee-For-Service (FFS) are assigned to the PCCM SL where they received the majority of their service, if tied, where they were seen last during the reporting period.</p> <p>Many hospital-based groups use the hospital service location (NPI+3) on their claims. As a result, hospital service locations have a greater number to attributed members and providers while primary care service locations have few attributed members and providers. Additionally, some health systems with multiple primary care sites are billing services under a single service location. As a result, for these providers, all of the members are assigned to the single SL that is billed on the claims.</p> | All                               | Measurement Year              |                                   |               |

\* Note: Many of these measures were developed based on the Healthcare Effectiveness Data and Information Set (HEDIS) measures developed by the National Center for Quality Assurance. In some instances the measures were modified to address data and population specifics of MaineCare members.

<sup>†</sup> All measures are shown for the two groups, members enrolled in the MaineCare primary care case management program and members who are not enrolled but are treated by your practice.

<sup>‡</sup> Look back period refers to the period of time that service use is examined to calculate the measure.

<sup>§</sup> To be eligible for the measures (included in the denominator), MaineCare members must meet these criteria.

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| <p><b>2. MaineCare Costs:</b> MaineCare costs derived from claims for the measurement period by cost categories per member months. Costs are derived from claims payments and reflect costs for all MaineCare services a member received during the measurement year.</p>  | All                               | Measurement Year              | All members enrolled adjusted for length of enrollment |               |
| <p><b>3. ER Utilization (Utilization):</b> Several measures of emergency room use are included including: Average number of emergency room (ER) visits per member per reporting period; Percent of members with an emergency room visit; Percent of members that use the ER that had more than one visit during the measurement period; Percent of ER Users with more than one visit; and Number of ER visits per 1000 member months. ER visits that result in an inpatient stay or that have a mental health related diagnosis are <b>not</b> included.</p>   | All                               | Measurement Year              | Members enrolled 1 or more months                      | ✓             |
| <p><b>4. Potential Avoidable Hospitalization Rate per 1000 Members:</b> based on Agency for HealthCare Research and Quality (AHRQ) Quality Indicators for potentially avoidable hospitalizations for ambulatory sensitive conditions (ACSA) which involve admissions that evidence suggest could have been avoided, at least in part due to better access to quality outpatient care. The acute composite includes hospitalizations for UTI, dehydration and bacterial Pneumonia. The chronic composite includes hospitalizations for short and long term complications from diabetes, COPD, hypertension, CHF, Angina without procedure, uncontrolled diabetes, Asthma in younger adults and lower-extremity amputation among patients with diabetes. The composite combines the acute and chronic measures.<sup>**</sup> Measure is calculated as a rate per 1000 members.</p> | Adult (21 and older)              | Measurement Year              | Six months MaineCare eligibility                       |               |
| <p><b>Quality Measures are listed in Alphabetical Order</b></p>  |                                   |                               |  |               |

<sup>\*\*</sup>For specifications see AHRQ website: [http://www.qualityindicators.ahrq.gov/downloads/pqi/pqi\\_technical\\_specs\\_v32.pdf](http://www.qualityindicators.ahrq.gov/downloads/pqi/pqi_technical_specs_v32.pdf)

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| <b>Adolescent Well Care Visits:</b> Percentage of members who were 12-20 years of age and who had at least one comprehensive well-care visit with a PCP or OB/GYN during the measurement year.  | C                                 | Measurement Year              | Six months MaineCare eligibility  | ✓             |
| <b>Adult's Access to Preventive/Ambulatory Health Services:</b> Percentage of members 21-44 and 45-64 years of age who had an ambulatory preventive care visit.   | A                                 | Measurement Year              | Six months MaineCare eligibility  | ✓(20-44)      |
| <b>Adult Preventive:</b> Percentage of members 21 years or older who had one or more EPSDT procedure(s) during the reporting period.  | A                                 | Measurement Year              | Six months MaineCare eligibility  |               |
| <b>Appropriate testing for Children with Pharyngitis:</b> The percentage of children 2-18 years of age who were diagnosed with pharyngitis, dispensed an antibiotic and received a group A streptococcus (strep) test for the episode. A higher rate represents better performance (i.e., appropriate testing). | C                                 | Measurement Year              | 2 years as of July 1 to 18 years as of June 30; continuous enrollment 30 days prior to the episode date through 3 days after the episode date (inclusive) | ✓             |
| <b>Asthma Patients with one or more Asthma-related Emergency Room Visits:</b> The percentage of children ages 2 to 20 diagnosed with asthma during the measurement year with one or more asthma-related emergency room (ER) visits.   | C                                 | Measurement Year              | Children 2 to 20 as of end of measurement year; no continuous enrollment required; exclude ICD-9-CM codes 493.20, 493.21, 493.22                          |               |

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|--|-----------------------------------|-------------------------------|--|---------------|
| <b>Breast Cancer Screening:</b> Percentage of women 42-64 years of age who had a mammogram to screen for breast cancer <sup>††</sup> . Measure excludes women who are dually eligible for Medicare.  | A                                 | 24 mos.                       | 11 or more months each measurement year  | ✓             |
| <b>Cervical Cancer Screening:</b> Percentage of women 24-64 years of age who received one or more Pap tests to screen for cervical cancer.   | A                                 | 36 mos.                       | Six months MaineCare eligibility   | ✓             |
| <b>Children Aged 1-3 who had a Developmental Screening during the measurement year:</b> The percentage of children aged 1, 2, or 3 receiving a developmental screening during the measurement year. The Screening had to occur prior to turning 1, 2 or 3. | C                                 | Measurement Year              | Children who turned 1,2,3 years of age in the measure year and who were eligible for 11 or more months prior to turning age 1,2,3.aged 1-3 as of end of measurement year |               |

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<sup>††</sup> MaineCare members can also have health insurance through the Medicare program. These members are referred to as a “dual eligible”. MaineCare is the payer of last resort, so Medicare will often pay for many services and MaineCare may not have a claim for that service. For this reason, dual eligible members are excluded from some measures. Members who are NOT dual eligible are referred to as “non-dual”.

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| <p><b>Children (ages 1-20) who received Dental Treatment:</b> The total number of children age one to twenty years who received any dental treatment services (D2000-D9999).</p>  | C                                 | Measurement Year              | Ages 1 – 20; enrolled in Medicaid or a CHIP Medicaid expansion program for at least 90 continuous days and eligible for EPSDT services      |               |
| <p><b>Children (ages 1-20) who received Fluoride Varnish Treatment:</b> The percentage of children ages 1-20 at the end of the measurement year who received any fluoride varnish treatment (D1206).</p>  | C                                 | Measurement Year              | Ages 1 – 20; enrolled in Medicaid or a CHIP Medicaid expansion program for at least 90 continuous days and eligible for EPSDT services      |               |
| <p><b>Children (ages 1-20) who received Preventive Dental Services:</b> The total number of children age one to twenty years who received any preventive dental services (D1000-D1999).</p>   | C                                 | Measurement Year              | Ages 1- 20 years; enrolled in Medicaid or a CHIP Medicaid expansion program for at least 90 continuous days and eligible for EPSDT services |               |
| <p><b>Children’s and Adolescent’s Access to a Primary Care Provider:</b> Percentage of members aged birth to 12 months, 12-24mos., 25 mos.-6yrs, 7-11yrs, and 12-19 yrs who had a visit with a PCP (12mos.-6yrs: 1 yr look back; 7-19 yrs: 2 yr look back).</p> | C                                 | Up to 24 mos.                 | 12 mos.-6 yrs. Uses 6 months MaineCare eligibility; 7 yrs - 19 uses 11 months in both years   | ✓             |

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|---|--------------------------------------|----------------------------------|--|------------------|
| <b>Children's EPSDT:</b> Percentage of members 0-20 years of age who had one or more EPSDT procedure(s) during the reporting period.  | C                                    | Measurement<br>Year              | Six months<br>MaineCare<br>eligibility   |                  |
| <b>Chlamydia Screening in Women:</b> Percentage of women 16-25 (children 16-20 and adults 21-25) years of age who were identified as sexually active (via pharmacy and/or claims data) and who had at least one test for Chlamydia during the measurement year.   | C/A                                  | Measurement<br>Year              | Six months<br>MaineCare<br>eligibility   | ✓                |
| <b>Cholesterol Management for Members with Cardiovascular Conditions:</b> The percentage of members 18 through 75 years of age who from January 1 through November 1 of the year prior to the measurement year were discharged alive for acute myocardial infarction (AMI), coronary artery bypass graft (CABG) or percutaneous transluminal coronary angioplasty (PTCA), or who had a diagnosis of ischemic vascular disease (IVD) during the measure year or year prior to the measurement year, who received an LDL-C screening. | A                                    | Measurement<br>Year              | 11 or more months<br>each measurement<br>year  | ✓                |
| <b>Diabetic Care HbA1c:</b> Percentage of members 21-64 years of age with diabetes (type 1 or type 2) who had a Hemoglobin A1c test in the measurement year and average number of tests they received.  | A                                    | Measurement<br>Year              | Six months<br>MaineCare<br>eligibility   | ✓(18-64)         |
| <b>Diabetes Care – Medical Attention for Nephropathy:</b> Percentage of members 21-64 years of age with diabetes (type 1 or type 2) who had a nephropathy screening test <i>or</i> evidence of nephropathy, as documented through administrative claims data.   | A                                    | Measurement<br>Year              | Aged 18-75 as of<br>Dec 31 of<br>measurement year;<br>11 or more months<br>during measurement<br>year. | ✓                |
| <b>Diabetic Eye Care Exams:</b> Percentage of members 21-64 years of age with diabetes (type 1 or type 2) who had a retinal eye exam performed  | A                                    | Measurement<br>Year              | Six months<br>MaineCare<br>eligibility   | ✓(18-64)         |

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| <p><b>Diabetic LDL measured within previous 12 mos.:</b> Percentage of members 21-64 years of age with diabetes (type 1 or type 2) who had a LDL-C screening performed</p>   | A                                 | 24 mos.                       | Six months MaineCare eligibility  | ✓ (18-64)     |
| <p><b>Follow-up after hospitalization for Mental Illness (FUH):</b> The percentage of discharges for members 6 years of age and older who were hospitalized for treatment of selected mental health disorders and who had an outpatient visit, an intensive outpatient encounter or partial hospitalization with a mental health practitioner. Two rates are reported.</p> <ul style="list-style-type: none"> <li>The percentage of discharges for which the member received follow-up within 30 days of discharge.</li> <li>The percentage of discharges for which the member received follow-up within 7 days of discharge.</li> </ul> | A/C                               | Measurement Year              | Continuous enrollment from date of discharge through 30 days after discharge.     | ✓             |
| <p><b>Follow-Up Care for Children Prescribed Attention-Deficit/Hyperactivity Disorder (ADHD) Medication:</b> Percentage of children 6-12 years of age newly prescribed ADHD medication who have at least 3 follow-up care visits w/in a 10-month period, one of which is within 30 days of when the first ADHD medication was dispensed.</p>   | C                                 | 25 mos.                       | Continuously enrolled 120 days prior to prescription start date and 30 days after | ✓             |
| <p><b>Lead Screening in the First and Second Year:</b> Percentage of members who turned one during the reporting period and received a lead test; Percentage of members who turned two during the reporting period and received a lead test; (Note: the data used to measure lead screening comes from both MaineCare claims and the Maine Center for Disease Control (CDC)).</p>  | C                                 | Measurement Year              | Child must be eligible from 6-12 months of age                                    |               |
| <p><b>Otitis Media with Effusion (OME) – Avoidance of Inappropriate Use of Systemic Antimicrobials:</b> Percentage of patients aged 2 months through 12 years with a diagnosis of OME who were not prescribed systemic antimicrobials.</p>   | C                                 | None listed                   | Ages 2 months through 12 years with a diagnosis of OME                            |               |

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|--|-----------------------------------|--|---|---------------------------------|
| <b>Tobacco Cessation Counseling:</b> Number of members 18 and older that received counseling to stop smoking   | A                                 | Measurement Year                                     | Six months MaineCare eligibility                            |                                 |
| <b>Use of Appropriate Medications for People with Asthma:</b> Percentage of members 5-64 years of age during the measurement year who were identified as having persistent asthma and who were appropriately prescribed medication during the measurement year.  | C                                 | Measurement Year                                     | 11 or more months each measurement year                     | ✓<br>(5-9, 10-17, 18-56, Total) |
| <b>Use of Spirometry Testing in the Assessment and Diagnosis of Chronic Pulmonary Disease (COPD):</b> Adults age 42 and older with a new (within the measurement year) diagnosis or newly active COPD who received spirometry testing to confirm the diagnosis. Spirometry testing must occur 730 days prior to or 180 days after the diagnosing event.  | A                                 | 730 days prior to or 180 days after diagnosing event | 11 or more months each measurement year                     | ✓                               |
| <b>Well-Child Visits ages 3-6 and 7-11:</b> Percentage of members who were three to eleven years of age who received one or more well-child visits with a PCP during the measurement year.   | C                                 | Measurement Year                                     | Six months MaineCare eligibility                            | ✓                               |
| <b>Well-Child Visits in the First 15 Months of Life:</b> Percentage of members who turned 15 months of age during the measurement year that had at least one well-child visit and the average number of well-child visits for these children. Child could have one month gap in eligibility during the eligibility requirement period. The percentages by visit counts (0-6 or more) are also shown. | C                                 | Up to 27 mos.  | Child must be eligible from age 31 days to 15 months of age | ✓                               |