# Appendix A-7: Newborn (NEWB-1) Measure Rate Calculation Rules

**NEWB-1 Measure Rules Effective as of Q3- 2022 and Q4-2022 discharges ONLY**

General Rule:  Proceed sequentially as directed using data elements submitted.  Each case must be assigned to a specific category (X, B, D, or E) and once assigned, review ends.

Categories

X - Case will be rejected, not in measure population

B - Case will be excluded, not in measure population

D - In measure population, excluded from numerator

E - In measure population, included in numerator

| Data Element Sequence # / Name | Rule |
|---|---|
| 1 Episode of Care | continue if value = NEWB-1, otherwise assign to Category X |
| 2 Provider Name | assign to Category X if field is empty (i.e., no characters) |
| 3 Provider ID | check against Provider ID table, assign to Category X if missing or no match |
| 4 First Name | assign to Category X if field is empty (i.e., no characters) |
| 5 Last Name | assign to Category X if field is empty (i.e., no characters) |
| 6 Birthdate | assign to Category X if field is empty (i.e., no date) |
| 7 Sex | assign to Category X if field is empty (i.e., no characters) |
| 8 Race | check against Race Code table, assign to Category X if missing or no match |
| 9 Hispanic Indicator | continue if value = Y or N, otherwise assign to Category X |
| 10 Patient ID | assign to Category X if field is empty (i.e., no characters) |
| 11 Admission Date | date cannot be after Discharge Date, if so, assign to Category X |
| | assign to Category X if field is empty or invalid (i.e., no date) |
| 12 Discharge Date | continue if date is within submission time frame, otherwise assign to Category X /cannot be prior to admit date |
| | assign to Category X if field is empty or invalid (i.e., no date) |
| 13 Payer Source | continue if valid value, otherwise assign to Category X |
| 14 MassHealth Member ID | assign to Category X if field is empty or invalid (i.e., no characters) |
| 15 Length of Stay | if value = >120 days, assign to Category B |
| 16 ICD-10-CM Other Diagnosis Code | if value = on table 11.21, assign to Category B |
| 17 ICD-10-CM Principal or Other Procedure Code | if value = on table 11.22, assign to Category B |
| 18 Discharge Disposition | if value = 4, 5, 6, assign to Category B/  assign to Category X if missing or no match |
| 19 Term Newborn | if value = 2 or 3, assign to Category B/ assign missing value to Category X |
| 20 Admission to NICU | if value = Y, assign to Category B/ assign missing value to Category X |
| 21 Exclusive Breast Milk Feeding | if value = N, assign to Category D / assign missing value to Category X |
| | if value = Y, assign to Category E |

$$\text{MEASURE RATE} = \frac{\text{Number of cases in Category E}}{\text{Number of cases in Category D + Number of cases in Category E}}$$

# Appendix A-7: Newborn (NEWB-1) Measure Rate Calculation Rules

# Appendix 7: Maternity (MAT-4) Measure Rate Calculation Rules

## MAT-4 Measure Rules Effective as of Q3- 2022 discharges

General Rule:  Proceed sequentially as directed using data elements submitted.  Each case must be assigned to a specific category (X, B, D, or E) and once assigned, review ends.

Categories

X - Case will be rejected, not in measure population

B - Case will be excluded, not in measure population

D - In measure population, excluded from numerator

E - In measure population, included in numerator

| Data Element Sequence # / Name | Rule |
|---|---|
| 1 Episode of Care | continue if value = MAT-4, otherwise assign to Category X |
| 2 Provider Name | assign to Category X if field is empty (i.e., no characters) |
| 3 Provider ID | check against Provider ID table, assign to Category X if missing or no match |
| 4 First Name | assign to Category X if field is empty (i.e., no characters) |
| 5 Last Name | assign to Category X if field is empty (i.e., no characters) |
| 6 Birthdate | assign to Category X if field is empty (i.e., no date) |
| 7 Sex | continue if value = F, otherwise assign to Category X |
| 8 Race | check against Race Code table, assign to Category X if missing or no match |
| 9 Hispanic Indicator | continue if value = Y or N, otherwise assign to Category X |
| 10 Patient ID | assign to Category X if field is empty (i.e., no characters) |
| 11 Admission Date | date cannot be after Discharge Date, if so, assign to Category X |
| | assign to Category X if field is empty  or invalid (i.e., no date) |
| 12 Discharge Date | continue if date is within submission time frame, otherwise assign to Category X/  cannot be prior to admit date |
| | assign to Category X if field is empty or invalid (i.e., no date) |
| 13 Discharge Disposition | check against Discharge Disposition Code table, assign to Category X if missing or no match |
| 14 Payer Source | continue if valid value, otherwise assign to Category X |
| 15 MassHealth Member ID | assign to Category X if field is empty or invalid (i.e., no characters) |
| 16 ICD-10-CM Principal or Other Diagnosis Code | if value = on table 11.09, assign to Category B / assign missing value to Category X |
| 17 ICD-10-CM Principal or Other Diagnosis Code | if value = none on table 11.08, assign to Category B |
| 18 Gestational Age | if value = < 37 or UTD, assign to Category B / assign missing value to Category X |
| 19 Previous Live Births | if value = Y, assign to Category B / assign missing value to Category X |
| 20 ICD-10-PCS Principal or Other Procedure Code | if value = none on table 11.06, assign to Category D |
| | if value = on table 11.06, assign to Category E |

$$\text{MEASURE RATE} = \frac{\text{Number of cases in Category E}}{\text{Number of cases in Category D} + \text{Number of cases in Category E}}$$

# Appendix 7: Maternity (MAT-4) Measure Rate Calculation Rules

# Appendix A-7 Care Coordination (CCM-1) Measure Rate Calculation Rules

## CCM-1 Measure Rules Effective as of Q3- 2022 discharges

General Rule:  Proceed sequentially as directed using data elements submitted.  Each case must be assigned to a specific category (X, B, D, or E) and once assigned, review ends.

Categories

X - Case will be rejected, not in measure population

B - Case will be excluded, not in measure population

D - In measure population, excluded from numerator

E - In measure population, included in numerator

Data Element Sequence # / Name

| # | Name | Rule |
|---|------|------|
| 1 | Episode of Care | continue if value = CCM, otherwise assign to Category X |
| 2 | Provider Name | assign to Category X if field is empty (i.e., no characters) |
| 3 | Provider ID | check against Provider ID table, assign to Category X if missing or no match |
| 4 | First Name | assign to Category X if field is empty (i.e., no characters) |
| 5 | Last Name | assign to Category X if field is empty (i.e., no characters) |
| 6 | Birthdate | assign to Category X if field is empty (i.e., no date) |
| 7 | Sex | assign to Category X if field is empty (i.e., no characters) |
| 8 | Race | check against Race Code table, assign to Category X if missing or no match |
| 9 | Hispanic Indicator | continue if value = Y or N, otherwise assign to Category X |
| 10 | Patient ID | assign to Category X if field is empty (i.e., no characters) |
| 11 | Admission Date | date cannot be after Discharge Date, if so, assign to Category X |
| | | assign to Category X if field is empty or invalid (i.e., no date) |
| 12 | Discharge Date | continue if date is within submission time frame, otherwise assign to Category X /cannot be prior to admit date |
| | | assign to Category X if field is empty or invalid (i.e., no date) |
| 13 | Discharge Disposition | if value = 6, 7, assign to Category B/  assign to Category X if missing or no match |
| 14 | Payer Source | continue if valid value, otherwise assign to Category X |
| 15 | MassHealth Member ID | assign to Category X if field is empty or invalid(i.e., no characters) |
| 16 | Reconciled Medication List | if value = N, assign to Category D / assign missing value to Category X |
| | | if value = Y, assign to Category E |

$$\text{MEASURE RATE} = \frac{\text{Number of cases in Category E}}{\text{Number of cases in Category D + Number of cases in Category E}}$$

# Appendix A-7 Care Coordination (CCM-2) Measure Rate Calculation Rules

## CCM-2 Measure Rules Effective as of Q3- 2022 discharges

General Rule:  Proceed sequentially as directed using data elements submitted.  Each case must be assigned to a specific category (X, B, D, or E) and once assigned, review ends.

Categories

X - Case will be rejected, not in measure population

B - Case will be excluded, not in measure population

D - In measure population, excluded from numerator

E - In measure population, included in numerator

| Data Element Sequence # / Name | Rule |
|---|---|
| 1 Episode of Care | continue if value = CCM, otherwise assign to Category X |
| 2 Provider Name | assign to Category X if field is empty (i.e., no characters) |
| 3 Provider ID | check against Provider ID table, assign to Category X if missing or no match |
| 4 First Name | assign to Category X if field is empty (i.e., no characters) |
| 5 Last Name | assign to Category X if field is empty (i.e., no characters) |
| 6 Birthdate | assign to Category X if field is empty (i.e., no date) |
| 7 Sex | assign to Category X if field is empty (i.e., no characters) |
| 8 Race | check against Race Code table, assign to Category X if missing or no match |
| 9 Hispanic Indicator | continue if value = Y or N, otherwise assign to Category X |
| 10 Patient ID | assign to Category X if field is empty (i.e., no characters) |
| 11 Admission Date | date cannot be after Discharge Date, if so, assign to Category X |
| | assign to Category X if field is empty or invalid (i.e., no date) |
| 12 Discharge Date | continue if date is within submission time frame, otherwise assign to Category X /cannot be prior to admit date |
| | assign to Category X if field is empty or invalid (i.e., no date) |
| 13 Discharge Disposition | if value = 6, 7, assign to Category B/  assign to Category X if missing or no match |
| 14 Payer Source | continue if valid value, otherwise assign to Category X |
| 15 MassHealth Member ID | assign to Category X if field is empty or invalid (i.e., no characters) |

# Appendix A-7 Care Coordination (CCM-2) Measure Rate Calculation Rules

## CCM-2 Measure Rules Effective as of Q3- 2021 discharges

| Data Element Sequence # / Name | Rule |
|---|---|
| 16 Transition Record | if value = N, assign to Category D / assign missing value to Category X |
| 17 Reason for Inpatient Admission | assign missing value to Category X, if value = Y, add 1 to Transition Record Counter |
| 18 Medical Procedures & Tests | assign missing value to Category X, if value = Y, add 1 to Transition Record Counter |
| 19 Discharge Diagnosis | assign missing value to Category X, if value = Y, add 1 to Transition Record Counter |
| 20 Current Medication List | assign missing value to Category X, if value = Y, add 1 to Transition Record Counter |
| 21 Studies Pending at Discharge | assign missing value to Category X, if value = Y, add 1 to Transition Record Counter |
| 22 Patient Instructions | assign missing value to Category X, if value = Y, add 1 to Transition Record Counter |
| 23 Advance Care Plan | if patient < 18, go to data element Contact Information 24/7 (Sequence #24) |
| | assign missing value to Category X, if value = Y, add 1 to Transition Record Counter |
| 24 Contact Information 24 hrs/ 7 days | assign missing value to Category X, if value = Y, add 1 to Transition Record Counter |
| 25 Contact Information Studies Pending | assign missing value to Category X, if value = Y, add 1 to Transition Record Counter |
| 26 Plan for Follow-Up Care | assign missing value to Category X, if value = Y, add 1 to Transition Record Counter |
| 27 Primary Physician/ Health Care Professional Designated for Follow-Up Care | assign missing value to Category X, if value = Y, add 1 to Transition Record Counter |
| 28 *calculated value* | if patient <18 and transition record counter < 10, assign to Category D |
| | if patient <18 and transition record counter = 10, assign to Category E |
| | if patient >= 18 and transition record counter < 11, assign to Category D |
| | if patient >= 18 and transition record counter = 11, assign to Category E |

$$\text{MEASURE RATE} = \frac{\text{Number of cases in Category E}}{\text{Number of cases in Category D} + \text{Number of cases in Category E}}$$

# Appendix A-7 Care Coordination (CCM-3) Measure Rate Calculation Rules

## CCM-3 Measure Rules Effective as of Q3- 2022 discharges

General Rule:  Proceed sequentially as directed using data elements submitted.  Each case must be assigned to a specific category (X, B, D, or E) and once assigned, review ends.

Categories
X - Case will be rejected, not in measure population
B - Case will be excluded, not in measure population
D - In measure population, excluded from numerator
E - In measure population, included in numerator

| Data Element Sequence # / Name | Rule |
|---|---|
| 1 Episode of Care | continue if value = CCM, otherwise assign to Category X |
| 2 Provider Name | assign to Category X if field is empty (i.e., no characters) |
| 3 Provider ID | check against Provider ID table, assign to Category X if missing or no match |
| 4 First Name | assign to Category X if field is empty (i.e., no characters) |
| 5 Last Name | assign to Category X if field is empty (i.e., no characters) |
| 6 Birthdate | assign to Category X if field is empty (i.e., no date) |
| 7 Sex | assign to Category X if field is empty (i.e., no characters) |
| 8 Race | check against Race Code table, assign to Category X if missing or no match |
| 9 Hispanic Indicator | continue if value = Y or N, otherwise assign to Category X |
| 10 Patient ID | assign to Category X if field is empty (i.e., no characters) |
| 11 Admission Date | date cannot be after Discharge Date, if so, assign to Category X |
| | assign to Category X if field is empty or invalid (i.e., no date) |
| 12 Discharge Date | continue if date is within submission time frame, otherwise assign to Category X / cannot be prior to admit date |
| | assign to Category X if field is empty or invalid (i.e., no date) |
| 13 Discharge Disposition | if value = 6, 7, assign to Category B/  assign to Category X if missing or no match |
| 14 Payer Source | continue if valid value, otherwise assign to Category X |
| 15 MassHealth Member ID | assign to Category X if field is empty  or invalid (i.e., no characters) |
| 16 *Patient Refusal of Transmission* | *assign missing value to Category X, if value = Y, assign to Category B* |
| 17 Transmission Date | if value = UTD, assign to Category D / assign missing or invalid value to Category X |
| 18 *calculated value* | if (Transmission Date  - Discharge Date ) > 2 days, assign to Category D |
| | if (Transmission Date  - Discharge Date) < 0 days, assign to Category D |
| | if (Transmission Date  - Discharge Date)  >= 0 and <= 2 days, assign to Category E |

$$\text{MEASURE RATE} = \frac{\text{Number of cases in Category E}}{\text{Number of cases in Category D} + \text{Number of cases in Category E}}$$