

Appendix A-9 Care Coordination (CCM-1) Measure Rate Calculation Rules

CCM-1 Measure Rules Effective Q3-2023 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

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

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

Appendix A-9 Care Coordination (CCM-2) Measure Rate Calculation Rules

CCM-2 Measure Rules Effective as of Q3- 2023 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-9 Care Coordination (CCM-2) Measure Rate Calculation Rules

CCM-2 Measure Rules Effective Q1- 2023 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 Primary Physician/ Health Care Professional Designated for Follow-Up	assign missing value to Category X, if value = Y, add 1 to Transition Record Counter
27 Care	assign missing value to Category X, if value = Y, add 1 to Transition Record Counter
28 <i>calculated value</i>	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-9 Care Coordination (CCM-3) Measure Rate Calculation Rules

CCM-3 Measure Rules Effective Q3- 2023

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 <i>calculated value</i>	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

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

Appendix A-9: Substance Use Treatment (SUB-2) Measure Rate Calculation Rules

SUB-2 Measure Rules Effective as of Q3- 2023 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)

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 = SUB, 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	Patient Age	if value =< 18 years assign to Category B
16	Length of Stay	if value = <=1 days assign to Category B
17	Comfort Measures Only	if value = 1, 2, 3 assign to Category B/ assign missing or invalid value to Category X
18	Alcohol Use Status	if value = 1, 5, 7 assign to Category B/ assign missing or invalid value to Category X
		if value = 3, 4, 6 assign to Category D
19	Brief Intervention	if value = 3 assign to Category D/ assign missing or invalid value to Category X
		if value = 1, 2 assign to Category E

Appendix A-9: Substance Use Treatment (SUB-2) Measure Rate Calculation Rules

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

Appendix A-9: Substance Use Treatment (SUB-3) Measure Rate Calculation Rules

SUB-3 Measure Rules Effective as of Q3- 2023 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 = SUB, 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)
	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	Patient Age	if value = < 18 years assign to Category B
16	Length of Stay	if value = ≤ 1 days assign to Category B
17	Comfort Measures Only	if value = 1, 2, 3 assign to Category B/ assign missing or invalid value to Category X
18	Alcohol Use Status	if value = 7 assign to Category B/ assign missing or invalid value to Category X
19	Discharge Disposition	if value = 2,3,4,5,6,7, assign to Category B/ assign to Category X if missing or no match
20	ICD-10-CM Principal or Other Diagnos	if value = if all missing or none in Table 13.1, continue to 21
21	ICD-10-CM Principal or Other Diagnos	if value = if all missing or none in Table 13.2, continue to 22

Appendix A-9: Substance Use Treatment (SUB-3) Measure Rate Calculation Rules

22	ICD-10-PSC Principal or Other Process	if value = if all missing or none on Table 13.3, assign to Category B
23	Referral for Addictions Treatment	if value =4 assign to Category B/ assign missing or invalid value to Category X
24	Prescription for Alcohol or Drug Disorder	if value=3 assign to Category B/ assign missing or invalid value to Category X
25	Referral for Addictions Treatment	if value = 1,3 assign to Category E
26	Prescription for Alcohol or Drug Disorder	if value=4 assign to Category D
		if value = 1, 2 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 9: Maternity (MAT-4) Measure Rate Calculation Rules

MAT-4 Measure Rules Effective with Q3-2023 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 <i>Previous Births</i>	<i>if value = Y, assign to Category B / assign missing value to Category X</i>
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 9: Maternity (MAT-4) Measure Rate Calculation Rules

Appendix A-9: Newborn (NEWB-3) Measure Rate Calculation Rules

NEWB-3 Measure Rules Effective as of Q3- 2023 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 = NEWB-3, 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	ICD-10-CM Principal or Other Diagn	if value = on table 11.30, 11.31, 11.32, assign to Category B
16	Discharge Disposition	if value = 3, 4, 5, 6, proceed to line 32
17	ICD-10-CM Principal or Other Diagn	if value = on table 11.36, 11.37, 11.38, 11.39, 11.40, 11.41, proceed to line 32
18	ICD-10-CM Principal or Other Procedure	if value = on table 11.42, 11.43, 11.44, proceed to line 32
19	ICD-10-CM Principal or Other Diagn	if value = on table 11.45, proceed to line 20
20	Length of Stay	if value = >4 days, proceed to line 32
21	ICD-10-CM Principal or Other Diagn	if value = at least one on Table 11.46, 11.47, proceed to line 51

Appendix A-9: Newborn (NEWB-3) Measure Rate Calculation Rules

22	ICD-10-CM Principal or Other Procedure if value = at least one on Table 11.48, proceed to line 37
23	ICD-10-CM Principal or Other Diagn if value = at least one on Table 11.20.2, proceed to line 24
24	Length of Stay if value = <=2 days, proceed to line 42
25	ICD-10-CM Principal or Other Diagn if value = none on Table 11.20.2 proceed to line 26
26	Length of Stay if value = <=4 days, proceed to line 42
27	ICD-10-CM Principal or Other Diagn if value =at least one on Table 11.49, 11.50, 11.53, proceed to line 37
28	ICD-10-CM Principal or Other Procedure if value =at least one on Table 11.51, 11.52, proceed to line 37
29	Length of Stay if value = <= 5 days, proceed to line 42
30	ICD-10-CM Principal or Other Diagnosis if value = at least one on Table 11.33, 11.35, proceed to line 42
31	ICD-10-CM Principal or Other Procedure if value =at least one on Table 11.34, proceed to line 42/ otherwise proceed to line 37
32	Severe Complications
33	Birth Weight if value = <2500g or UTD, assign to Category B/ assign missing value to Category X
34	Term Newborn if value =2, assign to Category B/ assign missing value to Category X
35	Term Newborn if value = 1, assign to Category E
36	Birth Weight if value= <3000g, assign to Category B if value = >= 3000g, assign to Category E
37	Moderate Complications
38	Birth Weight if value = <2500g or UTD, assign to Category B/ assign missing value to Category X
39	Term Newborn if value =2, assign to Category B/ assign missing value to Category X
40	Term Newborn if value = 1, assign to Category E
41	Birth Weight if value= <3000g, assign to Category B if value =>= 3000g, assign to Category E
42	Overall Complications
43	Birth Weight if value = <2500g or UTD, assign to Category B/ assign missing value to Category X
44	Term Newborn if value =2, assign to Category B/ assign missing value to Category X
45	Term Newborn if value = 1, assign to Category D
46	Birth Weight if value= <3000g, assign to Category B if value =>= 3000g, assign to Category D
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MEASURE RATE = $\frac{\text{Number of cases in Category E}}{\text{Number of cases in Category D} + \text{Number of cases in Category E}}$	