Text Description for PCPI eSpecification

Clinical Topic	**Maternity Care**
Measure Title	**Behavioral Health Risk Assessment**
Measure #	**MC-3**
Measure Description	Percentage of patients, regardless of age, who gave birth during a 12-month period seen at least once for prenatal care who received a behavioral health screening risk assessment that includes the following screenings at the first prenatal visit: screening for depression, alcohol use, tobacco use, drug use, and intimate partner violence screening
Measurement Period	12 consecutive months
Initial Patient Population	All patients, regardless of age, who gave birth during a 12-month period seen at least once for prenatal care
Denominator Statement	Equals Initial Patient Population
Denominator Exclusions	None

Text Description for PCPI eSpecification

Numerator Statement	Patients who received the following behavioral health screening risk assessments at the first prenatal visit Depression screening Patients who were screened for depression at the first visit. Questions may be asked either directly by a health care provider or in the form of self-completed paper- or computer administered questionnaires and results should be documented in the medical record. Depression screening may include a self-reported validated depression screening tool (eg, PHQ-2, Beck Depression Inventory, Beck Depression Inventory for Primary Care, Edinburgh Postnatal Depression Scale (EPDS)) Alcohol use screening Patients who were screened for any alcohol use at the first visit Tobacco use screening Patients who were screened for tobacco use* at the first visit Drug use (illicit and prescription, over the counter) screening Patients who were screened for any drug use at the first visit Intimate partner violence screening Patients who were screened for intimate partner violence/abuse at the first visit. Questions may be asked either directly by a health care provider or in the form of self-completed paper- or computer administered questionnaires and results should be documented in the medical record. Intimate partner violence screening may include a self-reported validated depression screening tool (eg, Hurt, Insult, Threaten, and Scream (HITS), Woman Abuse Screening Tool (WAST), Partner Violence Screen (PVS), Abuse Assessment Screen (AAS)) *To satisfactorily meet the numerator – ALL screening components must be performed.*
Denominator Exceptions	None

MATERNITY CARE
Data Requirements for PCPI eSpecification

Measure #3 : Behavioral Health Risk Assessment

Measure Component	QDM* Standard Category	QDM* Data Type	Value Set Name	Standard Terminology	OID	Constraints	Comments/Rationale
Supplemental Data Elements	Individual Characteristic	Patient Characteristic	Age at Delivery	LOINC	2.16.840.1.113883.3.526.2.1434	during [Attribute, stop datetime: Date of Delivery]	There are no restrictions on age for inclusion in the measure; this data element is included for result stratification to identify disparities.
	Individual Characteristic	Patient Characteristic	Gender	HL7 (2.16.840.1.113883.5.1)	2.16.840.1.113883.1.11.1	during measurement period	This data element is collected for the purpose of stratifying results in an effort to highlight disparities.
	Individual Characteristic	Patient Characteristic	Race	CDC	2.16.840.1.114222.4.11.836	during measurement period	This data element is collected for the purpose of stratifying results in an effort to highlight disparities.
	Individual Characteristic	Patient Characteristic	Ethnicity	CDC	2.16.840.1.114222.4.11.837	during measurement period	This data element is collected for the purpose of stratifying results in an effort to highlight disparities.
	Individual Characteristic	Patient Characteristic	Preferred Language	CDC	2.16.840.1.114222.4.11.831	during measurement period	This data element is collected for the purpose of stratifying results in an effort to highlight disparities.
	Individual Characteristic	Patient Characteristic	Payer	Source of Payment Typology	2.16.840.1.113883.221.5	during measurement period	This data element is collected for the purpose of stratifying results in an effort to highlight disparities.
Initial Patient Population	Measure Timing	n/a	Measurement Start Date	n/a	n/a	TBD by measure implementer	
	Measure Timing	n/a	Measurement End Date	n/a	n/a	TBD by measure implementer	
	Procedure	Procedure, Performed	Vaginal Delivery	GROUPING CPT SNOMED-CT	2.16.840.1.113883.3.526.3.1341 2.16.840.1.113883.3.526.2.1411 2.16.840.1.113883.3.526.2.1412	during measurement period	
	Procedure	Procedure, Performed	Cesarean Section Delivery	GROUPING CPT SNOMED-CT	2.16.840.1.113883.3.526.3.1342 2.16.840.1.113883.3.526.2.1413 2.16.840.1.113883.3.526.2.1414	during measurement period	
	Attribute	Attribute: stop datetime	Date of Delivery	n/a	n/a	n/a	This data element is the date associated with "Procedure, Performed: Vaginal Delivery" or "Procedure, Performed: Cesarean Section Delivery" collected for the purpose of a 'look back period'. The delivery is the trigger for the measure and the numerator quality actions will be limited to 44 weeks prior to delivery to associate the action with the reporting pregnancy.
	Encounter	Encounter, Performed	Prenatal Visit	GROUPING SNOMED-CT	2.16.840.1.113883.3.526.03.1264 2.16.840.1.113883.3.526.02.338	starts before start of [Procedure, Performed: Vaginal Delivery] <= 44 weeks; starts before start of [Procedure, Performed: Cesarean Section Delivery] <= 44 weeks	
Denominator	Equals Initial Patient Population						
Denominator Exclusions	None						
Numerator	Risk Category/Assessment	Risk Category/Assessment	Depression Screening Tools Related to Maternity Care	GROUPING LOINC	2.16.840.1.113883.3.526.3.1359 2.16.840.1.113883.3.526.2.1441	during FIRST [Encounter, Performed: Prenatal Visit] starts before the start of [Attribute, stop datetime: Date of Delivery] <= 44 weeks	Depression screening may include a self-reported validated depression screening tool (eg, PHQ-2, Beck Depression Inventory, Beck Depression Inventory for Primary Care, Edinburgh Postnatal Depression Scale (EPDS))
	Intervention	Intervention, Result	Depression Screening-Procedure	GROUPING SNOMED-CT	2.16.840.1.113883.3.526.3.1360 2.16.840.1.113883.3.526.2.1442	during FIRST [Encounter, Performed: Prenatal Visit] starts before the start of [Attribute, stop datetime: Date of Delivery] <= 44 weeks	
	Risk Category/Assessment	Risk Category/Assessment	Alcohol Use Screening	GROUPING LOINC	2.16.840.1.113883.3.526.3.1361 2.16.840.1.113883.3.526.2.1443	during FIRST [Encounter, Performed: Prenatal Visit] starts before the start of [Attribute, stop datetime: Date of Delivery] <= 44 weeks	
	Risk Category/Assessment	Risk Category/Assessment	Tobacco Use Screening	GROUPING LOINC	2.16.840.1.113883.3.526.3.1362 2.16.840.1.113883.3.526.2.1444	during FIRST [Encounter, Performed: Prenatal Visit] starts before the start of [Attribute, stop datetime: Date of Delivery] <= 44 weeks	For the purposes of this measure, a 'positive' tobacco use screen will be admittance by patient of ANY use.
	Risk Category/Assessment	Risk Category/Assessment	Illicit, Prescription and Over the Counter Drug Use Screening	GROUPING LOINC	2.16.840.1.113883.3.526.3.1363 2.16.840.1.113883.3.526.2.1445	during FIRST [Encounter, Performed: Prenatal Visit] starts before the start of [Attribute, stop datetime: Date of Delivery] <= 44 weeks	This data element includes screening for illicit drug use, prescription drug use and over the counter drug use.
	Risk Category/Assessment	Risk Category/Assessment	Intimate Partner Violence Screening-Tool	GROUPING LOINC	2.16.840.1.113883.3.526.3.1364 2.16.840.1.113883.3.526.2.1446	during FIRST [Encounter, Performed: Prenatal Visit] starts before the start of [Attribute, stop datetime: Date of Delivery] <= 44 weeks	Intimate partner violence screening may include a self-reported validated screening tool (eg, Hurt, Insult, Threaten, and Scream (HITS), Woman Abuse Screening Tool (WAST), Partner Violence Screen (PVS), Abuse Assessment Screen (AAS))
	Attribute	Attribute: Result	Present "X"	n/a	n/a	n/a	This attribute can be applied to the to value sets titled: 'Depression Screening Tools Related to Maternity Care', 'Depression Screening-Procedure', 'Alcohol Use Screening', 'Tobacco Use Screening', 'Drug Use Screening', 'Intimate Partner Violence Screening-Tool'
Denominator Exception	No Valid Denominator Exceptions						

*The Quality Data Model (QDM), Version 2.1, was developed by National Quality Forum (NQF).

Measure Performance Rate Calculation:

$$\frac{N}{(D - EXCL - EXCEP)} = \textbf{Performance Rate}$$

The PCPI strongly recommends that exception rates also be computed and reported alongside performance rates as follows:

Measure Exception Rate Calculation:

$$\frac{EXCEP}{(D - EXCL)} = \textbf{Exception Rate}$$

Exception Types:
EXCEP= E1 (Medical Exceptions) + E2 (Patient Exceptions) + E3 (System Exceptions)
For patients who have more than one valid exception, only one exception should be counted when calculating the exception rate.

Initial Patient Population (IPP)	Denominator (D)	Exclusions (EXCL)	Numerator (N)	Exceptions (EXCEP)
Definition: The group of patients that a set of performance measures is designed to address; usually focused on a specific clinical condition (e.g., coronary artery disease, asthma). For example, a patient aged 18 years and older with a diagnosis of CAD who has at least 2 visits during the measurement period.	**Definition:** The specific group of patients for inclusion in a specific performance measure based on specific criteria (e.g., patient's age, diagnosis, prior MI). In some cases, the denominator may be identical to the initial patient population.	**Definition:** The specific group of patients who should be subtracted from the measure population and denominator before determining if the numerator criteria are met.	**Definition:** The group of patients in the denominator for whom a process or outcome of care occurs (e.g., flu vaccine received).	**Definition:** The valid reasons why patients who are included in the denominator population did not receive a process or outcome of care (described in the numerator). Patients may have Exceptions for medical reasons (e.g., patient has an egg allergy so they did not receive flu vaccine); patient reasons (e.g., patient declined flu vaccine); or system reasons (e.g., patient did not receive flu Vaccine due to vaccine shortage). These cases are subtracted from the denominator population for the performance calculation, however the number of patients with valid exceptions should be calculated and reported. This group of patients constitutes the Exception reporting population – patients for whom the numerator was not achieved and a there is a valid Exception.
Find the patients who meet the Initial Patient Population criteria (IPP)	Find the patients who qualify for the Denominator (D): From the patients within the Patient Population criteria (IPP) select those people who meet Denominator selection criteria. (In some cases the IPP and D are identical).	Find the patients who qualify for the Exclusion: (EXCL): From the patients within the Denominator criteria, select those patients who meet Exclusion criteria. The patients meeting exclusion criteria should be removed from the Denominator.	Find the patients who qualify for the Numerator (N): From the patients within the Denominator (D) criteria, select those people who meet Numerator selection criteria. Validate that the number of patients in the numerator is less than or equal to the number of patients in the denominator.	From the patients who did not meet the Numerator criteria, determine if the patient meets any criteria for the Exception (E1 + E2+E3). If they meet any criteria, they should be removed from the Denominator for performance calculation. As a point of reference, these cases are removed from the denominator population for the performance calculation, however the number of patients with valid exceptions should be calculated and reported.

PCPI eSpecification

Measure Logic for Maternity Care: Behavioral Health Risk Assessment

Measure Description: Percentage of patients, regardless of age, who gave birth during a 12-month period seen at least once for prenatal care who received a behavioral health screening risk assessment that includes the following screenings at the first prenatal visit: screening for depression, alcohol use, tobacco use, drug use, and intimate partner violence screening

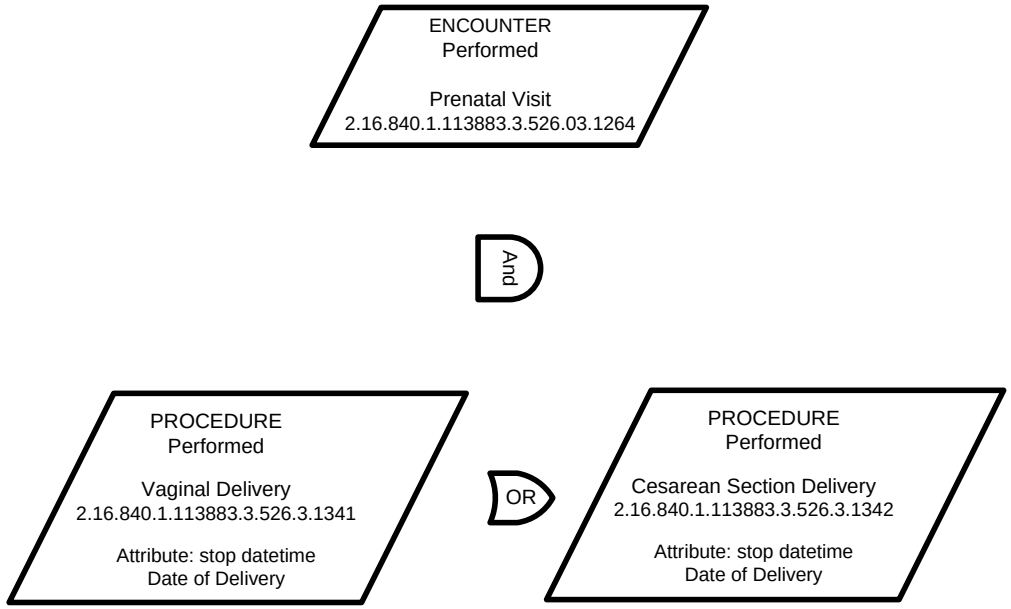
Measurement Period: 12 Consecutive Months

PCPI Measure #: MC-3

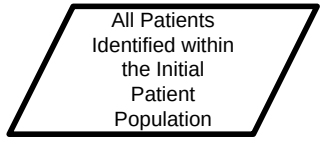
Supplemental Data Elements (SDE)

- PATIENT CHARACTERISTIC — Gender — 2.16.840.1.113883.1.11.1
- PATIENT CHARACTERISTIC — Race — 2.16.840.1.114222.4.11.836
- PATIENT CHARACTERISTIC — Ethnicity — 2.16.840.1.114222.4.11.837
- PATIENT CHARACTERISTIC — Preferred Language — 2.16.840.1.114222.4.11.831
- PATIENT CHARACTERISTIC — Payer — 2.16.840.1.113883.221.5
- PATIENT CHARACTERISTIC — Age at Delivery — 2.16.840.1.113883.3.526.2.1434

Identify Patients in Initial Patient Population (IPP)



Identify Patients in Denominator (D)



See Data Requirements Table for timing constraints and relationship between data elements.

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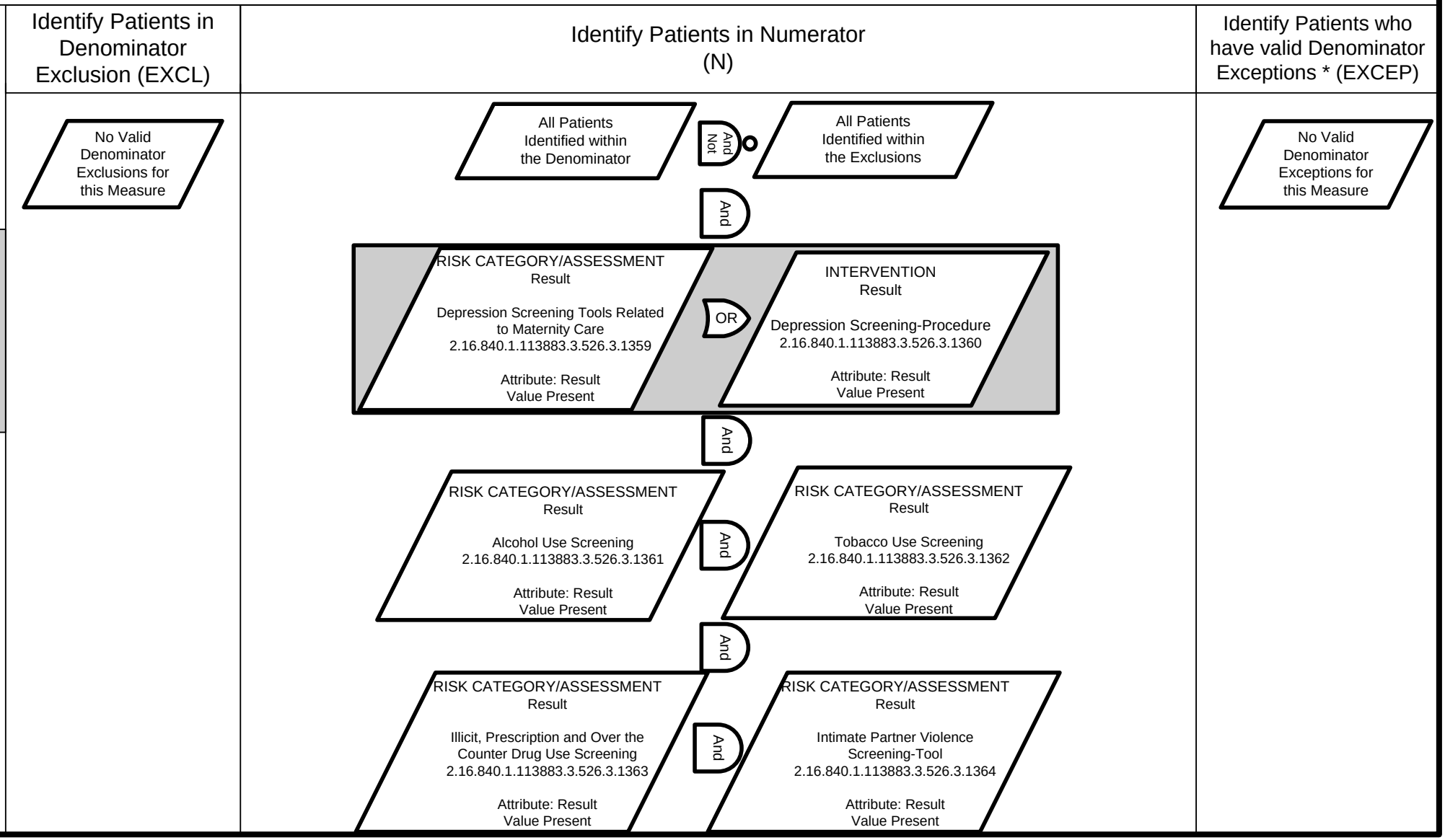

See Data Requirements Table for timing constraints and relationship between data elements.

*Coded examples for exceptions are NOT intended to be an exhaustive list. Exceptions will vary for each patient and situation.