

Definition of Terms

These are the terms used in the MCMP-PAT User's Guide and in other documents.

Algorithms

The MCMP Algorithms for Measure Calculations-EHRS (Electronic Health Records Systems) provide narrative descriptions of the clinical performance measures to assist in extraction of data from electronic health records. This is one of the Electronic Medical Record Specification documents.

Allowable Value

The predefined range of alphanumeric values that is valid for a data element in a database. Only records that contain the defined allowable values can be saved to the database.

Analytic Flowchart

Contains sets of rules and data elements necessary to calculate the clinical performance measures. This is one of the Paper Medical Record Specification documents that are used for manual data collection whether the collection is from an electronic or paper medical record.

CAD

Coronary Artery Disease, one of the topics for the MCMP demonstration project.

Clinical Performance Measure

Clinical performance measures are used to gauge how well an entity (i.e., hospitals, physician offices) provides care to its patients. Measures are based on scientific evidence and can reflect guidelines, standards of care or practice parameters. A clinical performance measure converts medical information from patient records into a rate or percentage that enables health care organizations to track their performance over time for quality improvement purposes.

CMS

Centers for Medicare & Medicaid Services, which is a part of the U.S. Department of Health and Human Services.

[Website](#) 

Completed Topic

Indicates that all required elements under a topic have been supplied and that there are no invalid values or inconsistencies on similar elements.

Consistency Check

The process of determining if the values of two closely related elements under different topics are the same.

CPT Codes

Current Procedural Terminology codes. A listing of descriptive terms and identifying codes for reporting services and procedures. The purpose of a CPT code is to provide a uniform language that accurately describes medical, surgical, and diagnostic services, and thereby serves as an effective means for reliable nationwide communication among physicians, and other healthcare providers, patients, and third parties.

Data Abstraction Definitions

This document comprehensively defines the data elements/variables and allowable values. Also included are instructions, inclusion and exclusion sections for each data element. These assist the abstractor in their ability to assign the most suitable (valid) allowable value for each element. These definitions provide a common set of guidelines for use by all medical records or clinical data system abstractors to promote consistency of abstraction.

Data Elements

This is data or values for which the calculations or conclusions for the performance measures will be based. These elements can be classified either as patient level data, i.e., birth date, gender or the measure specific data elements.

These are elements that are used by one specific measure or several measures in one specific measure set.

The diagram below illustrates the relationship of data elements with measure and disease topic.

Disease Topic

The screenshot shows a software interface for Disease Management (DM). At the top, there is a tab labeled 'DM' with a green checkmark. Below the tab is a section titled 'DM Confirmation' with a dropdown menu set to 'Yes'. Below that is a section titled 'DM3 : Blood Pressure Management' with a dropdown menu set to 'Yes'. Underneath, there are fields for 'Date Taken' (11/30/2005), 'Systolic' (140), and 'Diastolic' (90). Red arrows point from the text 'Disease Topic' to the 'DM' tab. Another red arrow points from 'Measure' to the 'DM3 : Blood Pressure Management' section. A bracket labeled 'Elements' points to the 'Date Taken', 'Systolic', and 'Diastolic' fields.

Denominator

Depicts the population evaluated by the performance measure.

Dialog Box

A temporary window on the screen that contains a set of choices. All forms that appear on top of the [main form](#) are dialog boxes. Users are not allowed to go back to the main form unless a dialog box on top of it is closed. An exception is the [Updater](#) dialog box. Users can close the main form even though the Updater is on top of it.

DM

Diabetes Mellitus is one of the topics for the MCMP demonstration project.

EHR

Electronic Health Record.

Electronic Submission of Data

Submission of data, which originates from a certified EHR, electronically via a tab delimited file using the PAT "Import" utility. While the source of the data must be the certified EHR, the tab delimited file may be created using other software.

Exclusions

Are unacceptable terms for particular data elements and are abstracted as negative findings. The list of exclusions should not be considered all-inclusive.

Element

See [Data Elements](#).

Flu Season

For the Influenza Immunization data element the flu season is defined as September 2005-Feb 2006 for the baseline year only. Thereafter, for performance year one through three the flu season falls within the designated performance year (Sept. through Feb.).

Forum

The Forum (or MCMP Forum) is a bulletin board on the Internet where your questions will be answered regarding any process related to the MCMP-PAT or the clinical performance measures will be posted. Documents and other files will be posted for you to download throughout the length of the demonstration. If your question is related to a specific performance measure, please note this at the beginning of your question by adding the measure number, i.e., CAD-1. Send your questions to us at the following email address: mcmpdemo@cms.hhs.gov. Your question will be researched and you will receive an answer back via email. The Q & A will also be posted on the MCMP Forum for all to benefit from. Users are required to [register](#) to access the forum. [Website](#)

Framework

Support structure in which another software project can be organized and developed. For MCMP-PAT, the .NET 1.1 framework is used.

Grid

It is a table-like control that is composed of rows and columns. It is also used to display a list of records for reporting in other forms. In the main form, it is an area where every-visit records are added and modified. Below is an example of a grid.

	Pre-filled	Visit Date ▲	Weight	Invalid	Why Invalid
*					
▶	<input checked="" type="checkbox"/>	01/03/2005	Yes	No	
	<input checked="" type="checkbox"/>	05/13/2005	Yes	No	
	<input checked="" type="checkbox"/>	08/09/2005		Yes	Visit not found.
	<input checked="" type="checkbox"/>	08/12/2005		Yes	Visit was to a podiatrist.
	<input checked="" type="checkbox"/>	12/31/2005	Yes	No	

HCPCS Codes

Health Care Procedure Coding System. HCPCS primarily represent items, medical equipment and supplies, prosthetics, orthotics, injectable drugs, transportation services, other services and non-physician services that are not covered by the American Medical Association's Current Procedural Terminology-4 (CPT-4) codes.

HF

Heart Failure is one of the topics for the MCMP demonstration project.

ICD-9-CM Codes

International Classification of Diseases, Ninth Revision, Clinical Modification. A two part classification system in current use for coding patient medical information used in abstracting system's and for classifying patients into diagnosis-related groups (DRGs). The first part is a comprehensive list of diseases with corresponding codes compatible with the World Health Organization's list of disease codes. The second part contains procedure codes independent of the disease codes.

IFMC

Iowa Foundation for Medical Care developed the MCMP-PAT application and will conduct the MCMP audit. [Website](#) 

Import

The process of copying data from a tab delimited file into a MCMP-PAT database using the import utility.

Incomplete Topic

Indicates that at least one required element under a topic has not been supplied, has an invalid value or is inconsistent with a similar element in another topic.

LOINC Codes

(Logical Observation Identifiers Names and Codes): LOINC codes are universal identifiers for laboratories and other clinical observations.

MCMP

Medicare Care Management Performance. This 3 year demonstration was mandated under Section 649 of the MMA to promote the use of health information technology and improve the quality of care for beneficiaries. Doctors in small to medium sized practices who meet clinical performance measure standards will receive a bonus payment for managing the care of eligible Medicare beneficiaries. The demonstration will be implemented in California, Arkansas, Massachusetts and Utah.

Measure Exclusions

For process measures, the Consortium (AMA) provides three categories of reasons for which a patient may be excluded from the denominator of an individual measure:

Medical reasons includes:

- not indicated (already received/performed, other)
- contraindicated (patient allergic history, potential adverse drug reaction, etc)

Patient reasons includes:

- patient declined
- economic, social, or religious reasons
- other patient reasons

System reasons includes:

- resources to perform the services not available
- insurance coverage/payor-related limitations
- other reasons attributable to health care delivery system

Numerator

Depicts the portion of the denominator population that satisfies the conditions of the performance measure.

PAT

Performance Assessment Tool. The MCMP Performance Assessment Tool will be the electronic data tool used in the MCMP Demonstration to abstract data from medical records or MCMP internal clinical data systems for quality measurement.

PC

Preventive Care is one of the topics for the MCMP demonstration project.

Performance Measure

A quantitative tool (for example, rate, ratio, index, percentage) that provides an indication of an organization's performance in relation to a specified process or outcome. Also it provides specific clinical and technical information on a measure. The information includes: performance measure name, description, numerator/denominator, included populations, excluded populations, data elements and sampling criteria.

Performance Rate

Calculated by dividing the numerator by the denominator resulting in a number that is converted into a percentage.

Performance Year

The timeline for the MCMP demonstration is as follows:

- Base Year: January 1, 2006-December 31, 2006
- Performance Year One: July 1, 2007-June 30, 2008
- Performance Year Two: July 1, 2008-June 30, 2009
- Performance Year Three: July 1, 2009-June 30, 2010

PHI

Protected Health Information.


Pre-filled Elements

Elements populated from claims prior to abstraction.

QIO

Quality Improvement Organization. QIOs work with consumers and physicians, hospitals, and other caregivers to refine care delivery systems to make sure patients get the right care at the right time, particularly patients from underserved populations. See the [links to the QIO websites](#) for more information.


QualityNet

QualityNet (formerly QNet Exchange) is a CMS-approved site for secure communication and data exchange between two or more entities exchanging protected health information (PHI). [Website](#) 

Rank

A read-only numeric value assigned to a patient that indicates his/her order in a disease disease topic or PC measure.

RTI International

RTI calculates performance results for the claim-based quality measures. Also pre-populates sampled patients and claims data into the medical record abstraction tool for each physician practice. Analyzes and calculates quality measure performance results for each physician practice from completed abstraction tools. [Website](#) 

SNM Codes

SNOMED (Systematized Nomenclature of Medicine) Clinical Terms (CT) was developed by the US College of Pathologists. SNOMED CT is an international healthcare terminology that covers the whole of medicine. The vision is to enable clinicians, researchers and patients to share and exchange healthcare and clinical knowledge worldwide.

Synchronization

The process of making the values of two elements under different topics the same whenever one of them is changed.

Tab-delimited File

A text file that stores tabular data and is composed of fields/columns separated by the Tab character and records/rows separated by newlines.

Topics

The four clinical quality topics that are being reported on by the abstraction of quality measures and meeting clinical quality performance standards for the MCMP project.

Variable Name

A unique name assigned to each data element and used in analysis.