¥	ARHOME Overall includes beneficiaries w/ aid category 06 and maps to the following benefit plans: HCIP (Health Care Independence Program), ABP (Alternative Benefit Plan), and FRAIL (Full Medicaid for Medically Frail) (from MMIS eligibility file).
¥¥	Qualified Health Plan (QHP) level reporting reflects only the beneficiaries known to that QHP (from QHP eligibility data sourced from the QHP being reported on). QHP claims from QHP were used for reporting. If a beneficiary was enrolled under a Medically Frail (FFS) plan or Alternate Benefit Plan (FFS) during a look-back period, then the claim was not included for QHP level reporting. A beneficiary can move from one plan to another plan during the performance period. For Low Birth Weight, Very Low Birth Weight, and Pre-Term Birth measures, the QHP level CY2020 results were updated for Centene (Ambetter, QCA, and QualChoice) and BCBS utilizing Q2 2022 QHP eligibility data. The BCBS segments were limited to segments starting on or after January 1, 2019. The CY2020 results for ARHOME Overall, AR Medicaid Overall, ARHOME Overall by Urban/Rural and by Race/Ethnicity did not change and are as reported in the June 2022 Advisory Panel meeting. Also, no changes were made to the CY2019 results for any of the reporting levels.
¥¥¥	ARHOME Overall breakouts by Urban/Rural results for CY2019 results, GDIT used the April 2017 version of the county crosswalk, (https://data.nber.org/data/cbsa-msa-fips-ssa-county-crosswalk.html), and for CY2020 and CY2021 results, used the March 2020 version of Census Bureau reference files, (https://www.census.gov/geographies/reference-files/time-series/demo/metro-micro/delineation-files.html), when a county is associated with a Metropolitan Statistical Area (MSA) the county is designated "Urban", otherwise, the county is designated "Rural".
	ARHOME Overall breakouts by Race/Ethnicity results into four race categories of "Black/African American", "Unknown", "White", and "Other" (where "Other" includes "American Indian/Alaska Native", "Asian", "Hispanic/Latino (1 or More Races)", "Hispanic/Latino (No Race)", "Native Hawaiian/Other Pacific Islander", "Two or More Races (Not Hispanic/Latino)"). GDIT used the federal race and ethnicity codes, as defined by MMIS beneficiary race table, to determine ethnicity and race of beneficiaries.
*	CMS published "Quality of Care for Adults in Medicaid: Findings from the 2020 Adult Core Set" Chart Pack (www.medicaid.gov/medicaid/quality-of-care/downloads/performance-measurement/2020-adult-chart-pack.pdf), and "Quality of Care for Adults in Medicaid: Findings from the 2021 Adult Core Set" Chart Pack (www.medicaid/quality-of-care/downloads/performance-measurement/2021-adult-chart-pack.pdf).
**	NCQA's State of Health Care Quality Report. NCQA produces the State of Health Care Quality Report which summarizes performance from the previous calendar year for key HEDIS and CAHPS measures. (https://www.ncqa.org/hedis/measures/).
***	AR Medicaid Overall values for CY2019 include all Medicaid and CHIP beneficiaries except Medicare/Medicaid dual eligible and ARHOME, meaning the population includes individuals in FFS, PCCM, PASSE, PACE, and Independent Choices. AR Medicaid Overall values for CY2020 and CY2021 include all Medicaid and CHIP beneficiaries except Medicare/Medicaid dual eligible, meaning the population includes individuals in FFS, PCCM, PASSE, PACE, Independent Choices, and ARHOME. For Low Birth Weight, Very Low Birth Weight, and Pre-Term Birth measures, the AR Medicaid Overall values includes all mothers with any eligibility segment on their baby's DOB (from MMIS eligibility file with no exclusions applied).
****	ARHOME FFS/QHP breakouts by Medically Frail (FFS) and by QHP use MMIS eligibility segments for the anchor date to assign coverage using a hierarchy (i.e., HCIP, then ABP, and then FRAIL). Each beneficiary will be assigned to only one plan by using the anchor date identified in the measure specification.
	TOTAL ENROLLEES for ARHOME Overall, ARHOME by urban/rural (i.e., MMIS demographic) and ARHOME by race/ethnicity (i.e., MMIS demographic) uses point in time beneficiary count as of December 31st of the reporting calendar year and includes where beneficiary has at least one eligibility segment out of "ABP/Frail/HCIP" eligibility segments, beneficiary was enrolled in at least one of those three ("ABP/Frail/HCIP") benefit plans. ARHOME Overall includes out of state beneficiaries.
	TOTAL ENROLLEES for ARHOME by QHP uses point in time beneficiary count as of December 31st of the reporting calendar year and includes at least one eligibility segment out of carrier eligibility segments, beneficiary was enrolled in the carrier designated benefit plan.
	TOTAL ENROLLEES for AR Medicaid Overall uses point in time beneficiary count as per CMS Core Set guideline but as of December 31st of the reporting calendar year, ages 19-64.
	Total Live Births for ARHOME Overall, ARHOME Overall breakouts by Urban/Rural (i.e., MMIS demographic) and ARHOME Overall breakouts by Race/Ethnicity (i.e., MMIS demographic) uses point in time beneficiary count as of December 31st of the reporting year and includes where beneficiary has at least one eligibility segment out of "ABP/Frail/HCIP" eligibility segments, beneficiary was enrolled in at least one of those three ("ABP/Frail/HCIP") benefit plans. AR Works Overall includes out of state beneficiaries.
	Total Live Births for ARHOME by QHP uses point in time beneficiary count as of December 31st of the reporting year and includes at least one eligibility segment out of carrier eligibility segments, beneficiary was enrolled in the carrier designated benefit plan.
	Total Live Births for AR Medicaid Overall uses point in time beneficiary count as of December 31st of the reporting year.
+	Homegrown measures guided by the 2020 CMS Core Set technical specifications of "Live Births Weighing Less than 2,500 Grams (LBW-CH)" and using two data sources: (1) birth certificates and (2) MMIS demographic data. Excludes birth certificates where infant living status not equal to yes, where birthweight and gestational week values are unknown or missing, where gestational week values are less than 17 weeks gestation or greater than 47 weeks gestation, and where birthweight values are less than 227g or greater than 8,165g.
Ħ	For CY2019 performance period, CMS used following data sources for reporting Live Births Weighing Less than 2,500 Grams (LBW-CH) for the 2020 CMS Child Core Set. Mathematica analysis of MACPro reports for the FFY 2020 reporting cycle as of June 18, 2021, and National Vital Statistics System Natality data obtained through Centers for Disease Control and Prevention Wide-ranging Online Data for Epidemiologic Research (CDC WONDER) (https://www.medicaid.gov/medicaid/quality-of-care/downloads/2021-child-chart-pack.pdf for LBW-CH on pg. 41).