

TARGET AREA	TARGET AREA DEFINITION
Low Comorbidity <i>*new as of Q4CY20 release</i>	<i>Numerator (N):</i> count of periods with a secondary diagnosis that qualifies as a low comorbidity adjustment (fourth position of Health Insurance Prospective Payment System [HIPPS] code equal to '2') paid to the HHA during the time frame <i>Denominator (D):</i> count of periods paid to the HHA during the time frame
High Comorbidity <i>*new as of Q4CY20 release</i>	<i>N:</i> count of periods with two secondary diagnoses that qualify as a high comorbidity adjustment (fourth position of HIPPS code equal to '3') <i>D:</i> count of periods paid to the HHA during the time frame
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Average Case Mix	<i>N:</i> sum of case mix weight for all periods paid to the HHA during the time frame, excluding LUPAs (identified by Part A National Claims History [NCH] HHA LUPA code) and PEPs (identified as patient discharge status code equal to '06') <i>D:</i> count of periods paid to the HHA during the time frame, excluding LUPAs and PEPs Note: reported as a rate, not a percent
Average Number of Periods	<i>N:</i> count of periods paid to the HHA during the time frame <i>D:</i> count of unique beneficiaries served by the HHA during the time frame Note: reported as a rate, not a percent
Periods with Low Visits <i>*revised as of Q4CY20 release</i>	<i>N:</i> count of periods with the number of visits equal to the LUPA threshold or one visit more than the LUPA threshold, paid to the HHA during the time frame <i>D:</i> count of periods paid to the HHA during the time frame
Non-LUPA Payments	<i>N:</i> count of periods paid to the HHA that did not have a LUPA payment during the time frame <i>D:</i> count of periods paid to the HHA during the time frame
Outlier Payment	<i>N:</i> sum of dollar amount of outlier payments (identified by the amount where Value Code equal to '17') for periods paid to the HHA during the time frame <i>D:</i> sum of dollar amount of total payments for periods paid to the HHA during the time frame
Admission Source <i>*new as of Q4CY20 release</i>	<i>N:</i> Count of periods where admission source is institutional (first position of HIPPS code equal to '2' or '4') <i>D:</i> count of periods paid to the HHA during the time frame