

Centers for Medicare & Medicaid Services

Special Needs Plan Approval

Process Scoring Criteria

for

Contract Year 2013

(October 27, 2011)

Description of the Scoring Criteria for Contract Year 2013

The National Committee for Quality Assurance (NCQA) Special Needs Plan (SNP) approval process is based on scoring each of the eleven (11) clinical and non-clinical elements of the model of care (MOC) in the SNP proposal. The scoring methodology involved developing standards for each of the eleven (11) elements of the MOC. The MOC is unique to SNPs and includes the following clinical and non-clinical elements: (1) description of the target population; (2) measurable goals; (3) staff structure and care management roles; (4) interdisciplinary care team (ICT); (5) provider network having specialized expertise and use of clinical practice guidelines and protocols; (6) MOC training for personnel and provider network; (7) health risk assessment (HRA); (8) individual care plan; (9) communication network; (10) care management for the most vulnerable population; and (11) performance and health outcome measurement. **The MOCs should be designed using the eleven elements but focused on meeting the clinical and non-clinical needs of the target population for that SNP: chronic condition (C-SNP), dual eligible (D-SNP), or institutional (I-SNP).**

Summary of MOC Evaluation Criteria for SNP Approval Process

Score	Description	Examples Review
4	The response is detailed and in depth.	Multiple specific examples for example: three (3) or more or one very detailed case study of an example
3	The response is detailed but is lacking depth.	Limited examples, less specificity. May include one (1) to two (2) examples; no case study.
2	The response provides limited details but does not provide enough information provided to support it.	No examples.
1	The response provides incomplete details or incorrect information or inappropriate material for this element.	No examples. There was an effort but the information provided was not responsive to the factor and element.
0	No details.	No examples.

Model of Care Elements and Standards

1. Description of the SNP-specific Target Population (at a minimum include: Medicaid subset D-SNP, institutional equivalent individuals enrolled in I-SNP, diabetes C-SNP, or chronic heart failure/cardiovascular C-SNP)

4	The response provides a detailed and in depth description of the population being served. The description includes multiple specific examples and/or a case study type of example specific to this factor. The description includes information on the incidence and prevalence of the specific diseases for a chronic condition special needs plan (C-SNP). For a dual-eligible special needs plan (D-SNP) the description includes information on both Medicare and Medicaid characteristics of the population. Further, for an institutional special needs plan (I-SNP) the description includes attributes of a patient and the type of long term care facility where the beneficiary resides.
3	The response provides a detailed description but is lacking depth. Limited examples are provided with less specificity on the description of the target population for the specific SNP type. No case study is provided as an example.
2	The response provides limited information on the description of the target population for the specific SNP type. No examples are included with this description.
1	The response provides incomplete details or incorrect information on the description of the target population for the specific SNP type. The description may contain material that is inappropriate or irrelevant for this factor.
0	No description/information provided.

2. Measurable Goals

2a. Describe the specific care management goals including:

These goals must be stated in measurable terms that indicate how the plan will know whether the goals have been achieved. The care management goals should include at a minimum:

- Improving access to essential services such as medical, mental health, and social services;
- Improving access to affordable care;
- Improving coordination of care through an identified point of contact (e.g., gatekeeper);
- Improving seamless transitions of care across healthcare settings, providers, and health services;
- Improving access to preventive health services;
- Assuring appropriate utilization of services; and
- Improving beneficiary health outcomes (specify MAO selected health outcome measures).

4	The response provides a detailed and in depth description of the goals that addresses all seven (7) bullets above. The description provides multiple specific examples and /or a detailed case study. Note all 7 bullets MUST be addressed.
3	The response provides a detailed description but is lacking depth. Limited examples are provided with less specificity on the goals. No case study is included as an example. Only 5 to 6 of the bullets above are addressed.
2	The response provides a limited description of the goals. Only 3 to 4 of the bullets as noted above are included in the response. No examples are provided.
1	The response provides incomplete details or incorrect information on the description of the goals. The description may contain material that is inappropriate or irrelevant for this factor. The response addresses only 1 to 2 of the bullets as noted above. No examples are included.
0	No description/information provided.

2b. Describe the goals as measurable outcomes and indicate how MAO will know when goals are met

4	The response provides a detailed and in depth description of clearly measurable goals to include bench marks for those goals, the specific time frames, and how achieving those goals will be determined. The description includes multiple specific examples and/or a case study type of example specific to this factor.
3	The response provides a detailed description but is lacking depth. Limited examples are provided with less specificity on the description of the goals, the specific time frames, and how achieving those goals will be determined.
2	The response provides limited information on the description of the measureable outcomes. The methods for measuring the benchmarks or determining when the goal has been achieved are not clearly described. No examples are included with this description.
1	The response provides incomplete details or incorrect information on the goals, the specific time frames, and how achieving those goals will be determined. The description may contain material that is inappropriate or irrelevant for this factor.
0	No description/information provided.

2c. Discuss actions MAO will take if goals are not met in the expected time frame

4	The response provides a detailed and in depth description of the internal corrective action plan and time frames that would be implemented by the plan to achieve this goal(s). The description includes multiple specific examples and/or a case study type of example specific to this factor.
3	The response provides a detailed description but is lacking depth. Limited examples are provided with less specificity on the description of the internal corrective action plan and time frames that would be implemented by the plan to achieve this goal(s). No case study is provided as an example.
2	The response provides limited information on the description of the internal corrective action plan and time frames that would be implemented by the plan to achieve this goal(s). No examples are included with this description.
1	The response provides incomplete details or incorrect information on the description of the internal corrective action plan and time frames that would be implemented by the plan to achieve this goal(s). The description may contain material that is inappropriate or irrelevant for this factor.
0	No description/information provided.

3. Staff Structure and Care Management Roles

3a. Identify the specific employed or contracted staff to perform administrative functions (at a minimum identify staff who process enrollments, verify eligibility, process claims)

4	The response provides a detailed and in depth description that identifies all staff performing administrative functions. The staff structure and roles includes at a minimum, specific details about the personnel who coordinate benefits, plan information, data collection and analysis for beneficiaries, network providers, and the public. The personnel and the assigned role(s) are specified. The description includes multiple specific examples and/or a case study type of example specific to this factor.
3	The response provides a detailed description but is lacking depth. Limited examples are provided with less specificity on the description of the staff performing administrative functions, the personnel and the assigned role(s) or functions. No case study is provided as an example.
2	The response provides limited information on the description of the staff performing administrative functions, the personnel and the assigned role(s) or functions. No examples are included with this description.
1	The response provides incomplete details or incorrect information on the description of the staff performing administrative functions, the personnel and the assigned role(s) or functions. The description may contain material that is inappropriate or irrelevant for this factor.
0	No description/information provided.

3b. Identify the specific employed or contracted staff to perform clinical functions (at a minimum: coordinate care management, provide clinical care, provide education)

4	The response provides a detailed and in depth description that identifies all staff performing clinical functions. The staff structure and roles includes at a minimum, specific details about personnel who coordinate care management, provide clinical care, and staff education. The personnel and the assigned role(s) are to be specified. The description includes multiple specific examples and/or a case study type of example specific to this factor.
3	The response provides a detailed description but is lacking depth. Limited examples are provided with less specificity on the description of the staff performing clinical functions related to providing clinical care, coordinating care management and staff education. No case study is provided as an example.
2	The response provides limited information on the description of the staff performing clinical functions related to providing clinical care, coordinating care management and staff education. No examples are included with this description.
1	The response provides incomplete details or incorrect information on the description of the staff performing clinical functions related to providing clinical care, coordinating care management and staff education. The description may contain material that is inappropriate or irrelevant for this factor.
0	No description/information provided.

3c. Identify the specific employed or contracted staff to perform administrative and clinical oversight functions (at a minimum verifies licensing and competency, reviews encounter data for appropriateness and timeliness of services, reviews pharmacy claims and utilization data for appropriateness, assures provider use of clinical practice guidelines)

4	The response provides a detailed and in depth description that identifies all staff performing administrative and clinical oversight functions (e.g., verifies licensing and competency, reviews encounter data for appropriateness and timeliness of services, reviews pharmacy claims and utilization data for appropriateness, assures provider use of clinical practice guidelines, etc.) This description specifies the job title and the assigned role or function. The description includes multiple specific examples and/or a case study type of example specific to this factor.
3	The response provides a detailed description but is lacking depth. Limited examples are provided with less specificity on the description of the staff performing administrative and clinical oversight functions. No case study is provided as an example.
2	The response provides limited information on the description of the staff performing administrative and clinical oversight functions. No examples are included with this description.
1	The response provides incomplete details or incorrect information on the description of the staff performing administrative and clinical oversight functions. The description may contain material that is inappropriate or irrelevant for this factor.
0	No description/information provided.

4. Interdisciplinary Care Team (ICT)

The description must include at a minimum:

- How the SNP will determine the composition of the ICT;
- How the beneficiary will participate in the ICT as feasible;
- How the ICT will operate and communicate; and
- How the activities of the ICT will be documented and maintained.

4a. Describe the composition of the ICT and how the MAO determined the membership

4	The response provides a detailed and in depth description of the composition of the ICT. The description includes multiple specific examples and/or a case study type of example specific to this factor. The response provides a detailed description of the composition and responsibilities of the ICT and how members are selected for the ICT. At a minimum, the description includes details from all four (4) bullets above. The description includes specific examples that are part of a protocol or standard operating procedure (SOP).
3	The response provides a detailed description but is lacking depth. Limited examples are provided with less specificity on the description of the composition of the ICT. Three (3) of the bullets are addressed. No case study is provided as an example.
2	The response addresses only 1-2 of the bullets as noted above and/or lacks specific examples. No examples are provided.
1	The response provides incomplete details or incorrect information on the description of the ICT. Only 1 of the bullets is addressed and the description may contain material that is inappropriate or irrelevant for this factor.
0	No description/information provided.

4b. Describe how the MAO will facilitate the participation of the beneficiary whenever feasible

4	The response provides a detailed and in depth description of the process for facilitating the inclusion of the beneficiary in the meetings with the ICT. The response provides a detailed description of the expectations for beneficiary participation to include: education and outreach efforts, the communication process, resources, and how the beneficiary has ongoing access to the ICT. The description includes multiple specific examples and/or a case study type of example specific to this factor.
3	The response provides a detailed description but is lacking depth. Limited examples are provided with less specificity on the description of the process for facilitating the inclusion of the beneficiary in the meetings with the ICT. No case study is provided as an example.
2	The response provides limited information on the description of the process for facilitating the inclusion of the beneficiary in the meetings with the ICT. No examples are included with this description.
1	The response provides incomplete details or incorrect information on the description of the process for facilitating the inclusion of the beneficiary in the meetings with the ICT. The description may contain material that is inappropriate or irrelevant for this factor.
0	No description/information provided.

4c. Describe how the ICT will operate and communicate (at a minimum includes: frequency of meetings, documentation of proceedings and retention of records, notification about ICT meetings, dissemination of ICT reports to all stakeholders)

4	The response provides a detailed and in depth description of the how the ICT will operate and communicate. The response includes a detailed description of how the activities of the ICT will be documented and maintained. This description includes who performs reviews of items such as: communication strategies, frequency of communication, service standards with each member of the ICT, assessments and administrative data. It states when the reviews are performed for different special needs patients. It also states who revises the Plan of Care (POC), if needed. The description also explains how the data/records are being kept so every member of the ICT has secure access to them. Frequency of meetings should also be documented. The description includes multiple specific examples and/or a case study type of example specific to this factor.
3	The response provides a detailed description but is lacking depth. Limited examples are provided with less specificity on the description of the procedures as described above for operating the ICT. No case study is provided as an example.
2	The response provides limited information on the description of the operations of the ICT as outlined above. No examples are included with this description.
1	The response provides incomplete details or incorrect information on the description of how the ICT operated. The description may contain material that is inappropriate or irrelevant for this factor.
0	No description/information provided.

5. Provider Network having Specialized Expertise and Use of Clinical Practice Guidelines and Protocols.

The description must include at a minimum:

- Facilities pertinent to the care of the targeted special needs population (e.g., inpatient, outpatient, rehabilitative, long-term care, psychiatric, laboratory, radiology/imaging, etc.);
- Medical specialists (e.g., cardiology, nephrology, psychiatry, geriatric specialists, pulmonologists, immunologists, etc.);
- Behavioral and mental health specialists (e.g., drug counselors, clinical psychologists, etc.);
- Nursing professionals (registered nurses, nurse practitioners, nurse managers, nurse educators, etc.);
- Allied health professionals (pharmacists, physical therapists, occupational specialists, speech pathologists, laboratory specialists, radiology specialists, etc.);
- How the plan determines that their facilities and providers are actively licensed and competent;
- Who determines the services beneficiaries will receive (e.g., who serves as the gatekeeper, how is the beneficiary connected to the appropriate service provider, etc.);
- How the provider network coordinates with the ICT and the beneficiary to deliver specialized services;
- How the plan assures that specialized services are delivered to the beneficiary in a timely and quality way;
- How reports on services delivered are shared with the plan and ICT for maintenance of a complete beneficiary record and incorporation into the care plan;
- How services are delivered across care settings and providers; and
- How the plan assures that providers use evidence-based clinical practice guidelines and nationally recognized protocols.

5a. Describe the specialized expertise in the MAO’s provider network that corresponds to the target population including facilities and providers (at a minimum includes: medical specialists, mental health specialists, dialysis facilities, specialty outpatient clinics)

4	The response provides a detailed and in depth description of the provider network and the details as outlined in the bullets noted above. The response includes a detailed description of the composition and responsibilities of the provider network having specialized expertise for the plans targeted special needs populations. The description must address at least 10-12 of the bullets for this factor. The description includes multiple specific examples and/or a case study type of example specific to this factor.
3	The response provides a detailed description but is lacking depth. The description must address at least 7-9 of the bullets for this factor. Limited examples are provided with less specificity on the description of the provider network and how it operates. No case study is provided as an example.
2	The response provides limited information on the description of the provider network. The description must address at least 3-6 of the bullets for this factor. No examples are included with this description.
1	The response provides incomplete details or incorrect information on the description of the provider network. The description must address at least 1-2 of the bullets for this factor. The description may contain material that is inappropriate or irrelevant for this factor.
0	No description/information provided.

5b. Describe how the MAO determined that its network facilities and providers were actively licensed and competent

4	The response provides a detailed and in depth description of the process for determining licensing and competency of the network facilities and providers. The response includes a detailed description of the credentialing program to include: (a) initial determination/verification of licensure and competency (credentialing program for initial practitioners, initial facilities and ancillary providers); (b) ongoing monitoring of licensure and competency (re-credentialing program for initial practitioners, initial facilities and ancillary providers); and (c) ongoing board certification monitoring. In addition, the description of the credentialing program provides details on how the MAO addresses negative information that must be added to a practitioner's profile between credentialing cycles. The description includes multiple specific examples and/or a case study type of example specific to this factor.
3	The response provides a detailed description but is lacking depth. Limited examples are provided with less specificity on the description of the process for determining licensing and competency of the network facilities and providers. No case study is provided as an example.
2	The response provides limited information on the description of the process for determining licensing and competency of the network facilities and providers. No examples are included with this description.
1	The response provides incomplete details or incorrect information on the description of the process for determining licensing and competency of the network facilities and providers. The description may contain material that is inappropriate or irrelevant for this factor.
0	No description/information provided.

5c. Describe who determines which services beneficiaries will receive (at a minimum includes: that is there a gatekeeper, and if not, how is the beneficiary connected to the appropriate service provider)

4	The response provides a detailed and in depth description of the services that the beneficiary will receive and the process on how the beneficiary will have access to the appropriate services. The description includes multiple specific examples and/or a case study type of example specific to this factor.
3	The response provides a detailed description but is lacking depth. Limited examples are provided with less specificity on the description of the services that the beneficiary will receive and the process on how the beneficiary will have access to the appropriate services. No case study is provided as an example.
2	The response provides limited information on the description of the services that the beneficiary will receive and the process on how the beneficiary will have access to the appropriate services. No examples are included with this description.
1	The response provides incomplete details or incorrect information on the description of the services that the beneficiary will receive and the process on how the beneficiary will have access to the appropriate services. The description may contain material that is inappropriate or irrelevant for this factor.
0	No description/information provided.

5d. Describe how the provider network coordinates with the ICT and the beneficiary to deliver specialized services (at a minimum includes: how care needs are communicated to all stakeholders, which personnel assures follow-up is scheduled and performed, how it assures that specialized services are delivered to the beneficiary in a timely and quality way, how reports on services delivered are shared with the plan and ICT for maintenance of a complete beneficiary record and incorporation into the care plan, how services are delivered across care settings and providers)

4	The response provides a detailed and in depth description on how the ICT coordinates the delivery of specialized services. This description includes at a minimum: how the ICT assures care is delivered in a timely manner, how quality of care is assessed, how the ICT maintains reports of services delivered and care plan records to show the coordination of care for beneficiaries across all providers and settings. The description includes multiple specific examples and/or a case study type of example specific to this factor.
3	The response provides a detailed description but is lacking depth. Limited examples are provided with less specificity on the description of the how the ICT coordinates the delivery of specialized services. No case study is provided as an example.
2	The response provides limited information on the description of the how the ICT coordinates the delivery of specialized services. No examples are included with this description.
1	The response provides incomplete details or incorrect information on the description of how the ICT coordinates the delivery of specialized services. The description may contain material that is inappropriate or irrelevant for this factor.
0	No description/information provided.

5e. Describe how the MAO ensures that providers use evidence-based clinical practice guidelines and nationally recognized protocols (at a minimum includes: review of medical records, pharmacy records, medical specialist reports, audio/video-conferencing to discuss protocols and clinical guidelines, written protocols providers send to MAO Medical Director for review)

4	The response provides a detailed and in depth description and specific examples of how it ensures that providers are using evidence-based practice guidelines and nationally recognized protocols. The description includes multiple specific examples and/or a case study type of example specific to this factor.
3	The response provides a detailed description but is lacking depth. Limited examples are provided with less specificity on the description of the how it ensures that providers are using evidence-based practice guidelines and nationally recognized protocols. No case study is provided as an example.
2	The response provides limited information on the description of the how it ensures that providers are using evidence-based practice guidelines and nationally recognized protocols. No examples are included with this description.
1	The response provides incomplete details or incorrect information on the description of the how it ensures that providers are using evidence-based practice guidelines and nationally recognized protocols. The description may contain material that is inappropriate or irrelevant for this factor.
0	No description/information provided.

6. Model of Care (MOC) Training for Personnel and Provider Network

6a. Describe how the MAO conducted initial and annual MOC training including training strategies and content (at a minimum includes at least one of the following: printed instructional materials, face-to-face training, web-based instruction, audio/video-conferencing)

4	The response provides a detailed and in depth description of the initial and annual MOC training. The types of training, number of participants and specific examples of slides or training materials are included. The description includes multiple specific examples and/or a case study type of example specific to this factor
3	The response provides a detailed description but is lacking depth; may have only described the initial or annual training. Limited examples are provided with less specificity on the description of the training. No case study is provided as an example.
2	The response provides limited details and lacks a description of the content and training strategies for the initial and/or annual MOC training. Evidence of specific examples of content and training materials is missing.
1	The response provides incomplete details or incorrect information on the description of the how it conducts the MOC training. The description may contain material that is inappropriate or irrelevant for this factor.
0	No description/information provided.

6b. Describe how the MAO assures and documents completion of training by the employed and contracted personnel (at a minimum include attendee lists, and at least one of the following: results of testing, web-based attendance confirmation, electronic training record)

4	The response provides a detailed and in depth description of the methodology for documenting that all personnel have received the training. The description includes multiple specific examples and/or a case study type of example specific to this factor.
3	The response provides a detailed description but is lacking depth. Limited examples are provided with less specificity on the description of the training materials and methods. No case study example is provided.
2	The response provides limited details of the description of the methodology and materials used to document the training. Examples of documentation such as the attendee list and results of training are missing.
1	The response provides incomplete details or incorrect information on the description of the training methods and materials. The description may contain material that is inappropriate or irrelevant for this factor.
0	No description/information is provided.

6c. Describe who the MAO identified as personnel responsible for oversight of the MOC training

4	The response provides a detailed and in depth description of the personnel who conducted the training, including their qualifications and the method for indentifying those individuals. The description includes multiple specific examples and/or a case study type of example specific to this factor.
3	The response provides a detailed description but is lacking depth. Limited examples are provided on the qualifications of the personnel conducting the training. No case study is provided as an example.
2	The response lacks details in the description of the personnel conducting the training. No specific examples are provided.
1	The response provides incomplete details or incorrect information on the description of the personnel conducting the training. The description may contain material that is inappropriate or irrelevant for this factor.
0	No description/information provided.

6d. Describe what actions the MAO will take when the required MOC training has not been completed (at a minimum includes: contract evaluation mechanism, follow-up communication to personnel/providers, incentives for training completion)

4	The response includes a detailed and in depth description of the procedures that are in place to address the situation where the required MOC training has not been completed. This description includes examples of letters to staff, staff performance evaluation criteria and incentives for completing training if applicable. The description includes multiple specific examples and/or a case study type of example specific to this factor.
3	The response provides a detailed description but is lacking depth. Limited examples are provided on the actions the SNP will take when the training has not been completed. No case study is provided as an example.
2	The response provides a limited description of the procedures that are in place to address the situation where the required MOC training has not been completed. No specific examples are provided.
1	The response provides incomplete details or incorrect information the description of the actions that will be taken when the MOC training has not been completed. The description may contain material that is inappropriate or irrelevant for this factor.
0	No description/information provided.

7. Health Risk Assessment (HRA)

7a. Describe the HRA tool the MAO uses to identify the specialized needs of its beneficiaries (at a minimum includes: medical, psychosocial, functional, and cognitive needs, medical and mental health history)

4	The response provides a detailed and in depth description of the HRA tool that includes medical and mental health history, psychosocial, functional and cognitive needs assessment at a minimum. The description includes multiple specific examples and/or a case study type of example specific to this factor.
3	The response provides a detailed description but is lacking depth. Limited examples are provided with less specificity on the description of the HRA tool. No case study is provided as an example.
2	The response provides limited information on the description of the HRA tool. No examples are included with this description.
1	The response provides incomplete details or incorrect information on the description of the HRA tool. The description may contain material that is inappropriate or irrelevant for this factor.
0	No description/information provided.

7b. Describe when and how the initial HRA and annual reassessment are conducted for each beneficiary (at a minimum includes: initial assessment within 90 days of enrollment, annual reassessment within one year of last assessment; conducted by phone interview, face-to-face, written form completed by beneficiary)

4	The response provides a detailed and in depth description of the process for conducting the initial and annual HRAs. The response provides a detailed description of the protocol that is used to coordinate the initial and annual HRA for each beneficiary to include at a minimum the timing of initial assessment and the annual reassessments and the methods used. The description also includes details on how the assessments are conducted (e.g. by phone interview, face-to-face, written form completed by beneficiary, etc). The description includes multiple specific examples and/or a case study type of example specific to this factor.
3	The response provides a detailed description but is lacking depth. Limited examples are provided with less specificity on the description of the process for conducting the initial or annual HRAs. No case study is provided as an example.
2	The response provides limited information on the description of the process for conducting the initial and/or annual health risk assessments. No examples are included with this description.
1	The response provides incomplete details or incorrect information on the description of the process for conducting the initial and annual HRAs. The description may contain material that is inappropriate or irrelevant for this factor.
0	No description/information provided.

7c. Describe the personnel who review, analyze, and stratify health care needs (at a minimum includes: professionally knowledgeable and credentialed personnel such as physicians, nurses, restorative therapists, pharmacists, psychologists)

4	The response provides a detailed and in depth description of the personnel (including title and credentials) who have the responsibility to review, analyze and stratify health care needs. The description includes multiple specific examples and/or a case study type of example specific to this factor.
3	The response provides a detailed description but is lacking depth. Limited examples are provided with less specificity on the description of the characteristics of the personnel performing the functions as described above. No case study is provided as an example.
2	The response provides limited information on the description of the characteristics of the personnel performing the functions as described above. No examples are included with this description.
1	The response provides incomplete details or incorrect information on the description of the characteristics of the personnel performing the functions as described above. The description may contain material that is inappropriate or irrelevant for this factor.
0	No description/information provided.

7d. Describe the communication mechanism the MAO institutes to notify the ICT, provider network, beneficiaries, etc. about the HRA and stratification results (at a minimum includes: written notification, secure electronic records)

4	The response provides a detailed and in depth description of the process and communication mechanism used to disseminate the results of the HRA to the ICT, provider network, beneficiaries and others. The description includes multiple specific examples and/or a case study type of example specific to this factor.
3	The response provides a detailed description but is lacking depth. Limited examples are provided with less specificity on the description of the process and communication mechanism used to disseminate the results of the HRA to the ICT, provider network, beneficiaries and others. No case study is provided as an example.
2	The response provides limited information on the description of the process and communication mechanism used to disseminate the results of the HRA to the ICT, provider network, beneficiaries and others. No examples are included with this description.
1	The response provides incomplete details or incorrect information on the description of the process and communication mechanism used to disseminate the results of the HRA to the ICT, provider network, beneficiaries and others. The description may contain material that is inappropriate or irrelevant for this factor.
0	No description/information provided.

8. Individualized Care Plan

8a. Describe which personnel develop the individualized plan of care (POC) and how the beneficiary is involved in its development as feasible

4	The response provides a detailed in depth description of the expectations for the beneficiary to include: education and outreach efforts, the communication process, resources, and how the beneficiary is involved and has ongoing access to the ICT. The description includes multiple specific examples and/or a case study type of example specific to this factor.
3	The response provides a detailed description but is lacking depth. Limited examples are provided with less specificity on the description of the personnel involved and how the beneficiary is included in the development of the individualized care plan. No case study example is provided.
2	The response provides limited information on the description of the personnel involved and how the beneficiary is included in the development of the individualized care plan. No examples are included with this description.
1	The response provides incomplete details or incorrect information on the description of the personnel involved and how the beneficiary is included in the development of the individualized care plan. The description may contain material that is inappropriate or irrelevant for this factor.
0	No description/information provided.

8b. Describe the essential elements incorporated in the POC (at a minimum includes: results of health risk assessments, goals/objectives, specific services and benefits, outcome measures, preferences for care, add-on benefits and services for vulnerable beneficiaries such as disabled or those near the end-of-life)

4	The response provides a detailed and in depth description of the essential elements in the POC as outlined above, including add-on benefits and services for vulnerable patients. The description includes multiple specific examples and/or a case study type of example specific to this factor.
3	The response provides a detailed description but is lacking depth. Limited examples are provided with less specificity on the description of the essential elements in the POC as outlined above, including add on benefits and services for vulnerable patients. No case study example is provided.
2	The response provides limited information on the description of the essential elements in the POC as outlined above, including add on benefits and services for vulnerable patients. No examples are included with this description.
1	The response provides incomplete details or incorrect information on the description of the essential elements in the POC as outlined above, including add on benefits and services for vulnerable patients. The description may contain material that is inappropriate or irrelevant for this factor.
0	No description/information provided.

8c. Describe the personnel who review the care plan and how frequently the POC is reviewed and revised (at a minimum includes: POC is developed by the ICT, beneficiary whenever feasible, and other pertinent specialists required by the beneficiary’s health needs; reviewed and revised annually and as a change in health status is identified)

4	The response provides a detailed and in depth description of the personnel who review and revise the care plan, and the frequency of the reviews and revisions of the care plan. The description includes multiple specific examples and/or a case study type of example specific to this factor.
3	The response provides a detailed description but is lacking depth. Limited examples are provided with less specificity on the description of the personnel who review and revise the care plan, and the frequency of the reviews and revisions of the care plan. No case study example is provided.
2	The response provides limited information on the description of the personnel who review and revise the care plan, and the frequency of the reviews and revisions of the care plan. No examples are included with this description.
1	The response provides incomplete details or incorrect information on the description of the personnel who review and revise the care plan, and the frequency of the reviews and revisions of the care plan. The description may contain material that is inappropriate or irrelevant for this factor.
0	No description/information provided.

8d. Describe how the POC is documented and where the documentation is maintained (at a minimum includes: accessible to interdisciplinary team, provider network, and beneficiary either in original form or copies; maintained in accordance with industry practices such as preserved from destruction, secured for privacy and confidentiality)

4	The response provides a detailed and in depth description of how the POC documentation is maintained and where it is located. The description includes multiple specific examples and/or a case study type of example specific to this factor.
3	The response provides a detailed description but is lacking depth. Limited examples are provided on how the POC is documented and how the documentation is maintained. No case study example is provided.
2	The response provides a limited description of how the POC is documented and/or where this document is maintained. No specific examples are included.
1	The response provides incomplete details or incorrect information provided on how the POC is documented and how that documentation is maintained. The description may contain material that is inappropriate or irrelevant for this factor.
0	No description/information provided.

8e. Describe how the POC and any care plan revisions are communicated to the beneficiary, ICT, MAO, and pertinent network providers

4	The response provides a detailed and in depth description of the communication process for making revisions to the ICT that will include the beneficiary, ICT, the MAO and other network providers. The description includes multiple specific examples and/or a case study type of example specific to this factor.
3	The response provides a detailed description but is lacking depth. Limited examples are provided on how the care plan and revisions to this plan are communicated to the beneficiary, ICT, MAO and other network providers. No case study example is provided.
2	The response provides a limited description of the communication process and/or excludes the beneficiary, ICT, MAO and any other pertinent providers in the MAO. No specific examples are included.
1	The response provides incomplete details or incorrect information on the description of the process for how the care plan and revisions to the plan are communicated to the beneficiary, ICT, MAO, and other network providers. The description may contain material that is inappropriate or irrelevant for this factor.
0	No description/information provided.

9. Communication Network

9a. Describe the MAOs structure for a communication network (at a minimum includes at least one of the following: web-based network, audio conferencing, face-to-face meetings)

4	The response provides a detailed and in depth description of the structure of the communication network that outlines the specifics of the network and how it is applicable to each stakeholder group. The description includes multiple specific examples and/or a case study type of example specific to this factor.
3	The response provides a detailed description but is lacking depth. Limited examples are provided with less specificity on the description of the communication network that outlines the specifics of the network and how it is applicable to each stakeholder group. No case study is provided as an example.
2	The response provides limited information on the description of the communication network. No examples are included with this description.
1	The response provides incomplete details or incorrect information on the description of the communication network. The description may contain material that is inappropriate or irrelevant for this factor.
0	No description/information provided.

9b. Describe how the communication network connects the plan, providers, beneficiaries, public, and regulatory agencies

4	The response provides a detailed and in depth description that specifically addresses how the communication network connects all of the stakeholders. The description includes multiple specific examples and/or a case study type of example specific to this factor.
3	The response provides a detailed description but is lacking depth. Limited examples are provided with less specificity on the description how the communication network connects all of the stakeholders. No case study is provided as an example.
2	The response provides limited information on the description of how the communication network connects all of the stakeholders. No examples are included with this description.
1	The response provides incomplete details or incorrect information on the description of how the communication network connects all of the stakeholders. The description may contain material that is inappropriate or irrelevant for this factor.
0	No description/information provided.

9c. Describe how the MAO preserves aspects of communication as evidence of care (at a minimum includes at least one of the following: recordings, written minutes, newsletters, interactive websites)

4	The response provides a detailed and in depth description of the mechanism(s) used to preserve aspects of communication as evidence of care. The description includes multiple specific examples and/or a case study type of example specific to this factor.
3	The response provides a detailed description but is lacking depth. Limited examples are provided with less specificity on the description of the mechanism(s) used to preserve aspects of communication as evidence of care. No case study is provided as an example.
2	The response provides limited information on the description of the mechanism(s) used to preserve aspects of communication as evidence of care. No examples are included with this description.
1	The response provides incomplete details or incorrect information on the description of the mechanism(s) used to preserve aspects of communication as evidence of care The description may contain material that is inappropriate or irrelevant for this factor.
0	No description/information provided.

9d. Describe the personnel having oversight responsibility for monitoring and evaluating communication effectiveness

4	The response provides a detailed and in depth description of the personnel having responsibility for monitoring and evaluating communication effectiveness. The description includes specific personnel information including job title, years of experience, licensing and/or certification. The description provides information about the process used to evaluate the effectiveness of the communication network. The description includes multiple specific examples and/or a case study type of example specific to this factor.
3	The response provides a detailed description of the personnel having responsibility for monitoring and evaluating communication effectiveness. The description includes specific personnel information including job title, years of experience, licensing and/or certification. The description provides information about the process used to evaluate the effectiveness of the communication network and includes limited examples, less specificity with no case study.
2	The response provides limited information on the description of the personnel having responsibility for monitoring and evaluating communication effectiveness. No examples are included with this description.
1	The response provides incomplete details or incorrect information on the description of the personnel having responsibility for monitoring and evaluating communication effectiveness. The description may contain material that is inappropriate or irrelevant for this factor.
0	No description/information provided.

10. Care Management for the Most Vulnerable Subpopulations

10a. Describe how the MAO identifies its most vulnerable beneficiaries

4	The response provides a detailed and in depth description of the methodology/ies used to identify vulnerable member beneficiaries. The description also includes how the MAO defines “vulnerable” for its enrollment population. The description includes multiple specific examples and/or a case study type of example specific to this factor.
3	The response provides a detailed description of the methodology/ies used to identify vulnerable member beneficiaries. The description also includes how the MAO defines “vulnerable” for its enrollment population and provides limited examples. No case study is provided as an example.
2	The response provides limited information on the description of the methodology/ies used to identify vulnerable member beneficiaries. No examples are included with this description.
1	The response provides incomplete details or incorrect information on the description of the methodology/ies used to identify vulnerable member beneficiaries. The description may contain material that is inappropriate or irrelevant for this factor.
0	No description/information provided.

10b. Describe the add-on services and benefits the MAO delivers to its most vulnerable beneficiaries

4	The response provides detailed and in depth information about the types of add-on services, how the beneficiary accesses the services(s), and the anticipated outcomes/benefits from receiving these services. The description includes multiple specific examples and/or a case study type of example specific to this factor.
3	The response provides a detailed description but is lacking depth. The response provides information about the types of add-on services, how the beneficiary accesses the services(s), and the anticipated outcomes/benefits from receiving these services. Limited examples are provided with less specificity. No case study is provided as an example.
2	The response provides limited information on the description of the types of add-on services, how the beneficiary accesses the services(s), and the anticipated outcomes/benefits from receiving these services. No examples are included with this description.
1	The response provides incomplete details or incorrect information on the description of the types of add-on services, how the beneficiary accesses the services(s), and the anticipated outcomes/benefits from receiving these services. The description may contain material that is inappropriate or irrelevant for this factor.
0	No description/information provided.

11. Performance and Health Outcome Measurement

11a. Describe how the MAO will collect, analyze, report, and evaluate the MOC (at a minimum include: specific data sources, specific performance and outcome measures)

4	The response provides a detailed and in depth description of the methodologies used to collect, analyze, and act on the results to evaluate the MOC. The description identifies the frequency of collection, analysis, and evaluation, as well as the steps taken to address any identified deficiencies. The description includes multiple specific examples and/or a case study type of example specific to this factor.
3	The response provides a detailed description but is lacking depth. Limited examples are provided with less specificity on the description of the methodologies used to collect, analyze, and act on the results to evaluate the MOC. No case study is provided as an example.
2	The response provides limited information on the description of the methodologies used to collect, analyze, and act on the results to evaluate the MOC. No examples are included with this description.
1	The response provides incomplete details or incorrect information on the description of the methodologies used to collect, analyze, and act on the results to evaluate the MOC. The description may contain material that is inappropriate or irrelevant for this factor.
0	No description/information provided.

11b. Describe who will collect, analyze, report, and act on to evaluate the MOC (at a minimum includes: internal quality specialists, contracted consultants)

4	The response includes a detailed and in depth description of the personnel involved in the collection, analysis and reporting and evaluation of the MOC. The description includes specific personnel information including job title, years of experience, licensing and/or certification. The description provides information about the process used to collect, analyze, evaluate and act on the results of the evaluation. The description includes multiple specific examples and/or a case study type of example specific to this factor.
3	The response provides a detailed description but is lacking depth. Limited examples are provided with less specificity on the description of the personnel involved in the collection, analysis and reporting and evaluation of the MOC. No case study is provided as an example.
2	The response provides limited information on the description of the personnel involved in the collection, analysis and reporting and evaluation of the MOC. No examples are included with this description.
1	The response provides incomplete details or incorrect information on the description of the personnel involved in the collection, analysis and reporting and evaluation of the MOC. The description may contain material that is inappropriate or irrelevant for this factor.
0	No description/information provided.

11c. Describe how the MAO will use the analyzed results of the performance measures to improve the MOC (at a minimum includes: internal committee, other structured mechanism)

4	The response provides a detailed and in depth description of how the results of the performance measures will be used to improve any identified deficiencies in the MOC, the methodology used to analyze these results, a description of the corrective actions to be taken and the established timeframe in which to improve the MOC. The description includes multiple specific examples and/or a case study type of example specific to this factor.
3	The response provides a detailed description but is lacking depth. Limited examples are provided with less specificity on the description of the how the results of the performance measures will be used to improve the MOC. No case study is provided as an example.
2	The response provides limited information on the description of the how the results of the performance measures will be used to improve the MOC. No examples are included with this description.
1	The response provides incomplete details or incorrect information on the description of the how the results of the performance measures will be used to improve the MOC. The description may contain material that is inappropriate or irrelevant for this factor.
0	No description/information provided.

11d. Describe how the evaluation of the model of care will be documented and preserved as evidence of the effectiveness of the MOC (at a minimum includes: electronic or print copies of its evaluation process)

4	The response provides a detailed and in depth description, including specific examples, of the mechanism(s) used to document the effectiveness the MOC. The description includes multiple specific examples and/or a case study type of example specific to this factor.
3	The response provides a detailed description but is lacking depth. Limited examples are provided with less specificity on the description of the mechanism(s) used to document the effectiveness the MOC. No case study is provided as an example.
2	The response provides limited information on the description of the mechanism(s) used to document the effectiveness the MOC. No examples are included with this description.
1	The response provides incomplete details or incorrect information on the description of the mechanism(s) used to document the effectiveness the MOC. The description may contain material that is inappropriate or irrelevant for this factor.
0	No description/information provided.

11e. Describe the personnel having oversight responsibility for monitoring and evaluating the MOC effectiveness (at a minimum includes: quality assurance specialists, consultants with quality experience)

4	The response provides a detailed and in depth description of the personnel having responsibility for monitoring and evaluating the effectiveness of the MOC. The description includes specific personnel information including job title, years of experience, licensing and/or certification. The description also provides information about the process used to evaluate the effectiveness of the MOC and provide specific examples. The description includes multiple specific examples and/or a case study type of example specific to this factor.
3	The response provides a detailed description but is lacking depth. Limited examples are provided with less specificity on the description of the personnel having responsibility for monitoring and evaluating the effectiveness of the MOC. No case study is provided as an example.
2	The response provides limited information on the description of the personnel having responsibility for monitoring and evaluating the effectiveness of the MOC. No examples are included with this description.
1	The response provides incomplete details or incorrect information on the description of the personnel having responsibility for monitoring and evaluating the effectiveness of the MOC. The description may contain material that is inappropriate or irrelevant for this factor.
0	No description/information provided.

11f. Describe how the MAO will communicate improvements in the MOC to stakeholders (at a minimum includes: webpage for announcements, printed newsletters, bulletins, announcements)

4	The response provides a detailed and in depth description on the process and the mechanism used to communicate improvements in the MOC to stakeholders. The description includes a timeframe for dissemination of the information and specific examples. The description includes multiple specific examples and/or a case study type of example specific to this factor.
3	The response provides a detailed description but is lacking depth. Limited examples are provided with less specificity on the description of the mechanism used to communicate improvements in the MOC to stakeholders. No case study is provided as an example.
2	The response provides limited information on the description of the mechanism used to communicate improvements in the MOC to stakeholders. No examples are included with this description.
1	The response provides incomplete details or incorrect information on the description of the mechanism used to communicate improvements in the MOC to stakeholders. The description may contain material that is inappropriate or irrelevant for this factor.
0	No description/information provided.