2023 Plan Year QIS Modification Summary Supplement OMB 0938-1286 Expiration Date: 02/29/2024

## **QIS Modification Summary Supplement**

Submission Date

Use this form to indicate any modifications to an existing quality improvement strategy (QIS) Implementation Plan on file for the upcoming plan year (making changes to goals, activities, measures, performance targets, and/or the product types). You must also report progress on your current QIS using the separate QIS Progress Report form.

For detailed instructions, please refer to the Quality Improvement Strategy: Technical Guidance and User Guide for the current plan year on the Marketplace Quality Initiatives website.

## QIS Submission Type

### Part A. QIS Submission

This field is required, but will not be scored as part of the QIS evaluation.

#### 1. Type of QIS Submission

Select the option that describes the type of QIS submission, and follow the instructions to complete the submission.

Type of QIS	Instructions
Continuing QIS with Modifications	<ol> <li>Issuers must complete 2 forms:         <ol> <li>Complete the Background Information section (Parts A and B) and the QIS Modification Summary (Part C) of the Modification Summary Supplement to reflect modifications for the upcoming year.</li> </ol> </li> <li>Complete the QIS Progress Report form to report on progress achieved on your QIS over the past plan year. See instructions in the QIS Progress Report form: Report on Progress.</li> </ol>

For CMS Use Only

2023 Plan Year QIS Modification Summary Supplement OMB 0938-1286 Expiration Date: 02/29/2024

## **Background Information**

## Part B. Issuer Information

These fields are required, but will not be scored as part of the QIS evaluation. Issuers may update the information in Part B from year to year, as needed.

- 2. Issuer Legal Name
- 3. HIOS Issuer ID

- 4. Issuer State
- 5. QIS Primary Contact's First Name

**QIS Primary Contact's Last Name** 

- 6. QIS Primary Contact's Email
- 7. QIS Primary Contact's Phone

Ext.

CMS, 7500 Security Boulevard, Attn: PRA Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850.

# Part C. QIS Modification Summary

Complete the following section regarding modifications to the QIS for the upcoming plan year.

8.	<b>Modifying Product</b>	Types,	Goals,	Activities,	and	Measures	or A	Associated	Performance	Targets
	(Must Pass)									

8a.	for product types, goals, activities, measures, and performance targets.)
	Product Types (complete 8b)

Activities (complete 8d)

Goals (complete 8c)

Measures (complete 8e)

Performance Targets (complete 8e)

**Note:** ONLY enter information in the fields below for the components you have indicated above.

Modifying QIS Product Types: For product type changes, indicate whether you are adding and/or removing any product types to the QIS originally listed in Criterion 2b of your Implementation Plan on file. Select all that apply.

Health Maintenance Organization (HMO)	Add	Remove
Point of Service (POS)	Add	Remove
Preferred Provider Organization (PPO)	Add	Remove
Exclusive Provider Organization (EPO)	Add	Remove
Indemnity	Add	Remove

Modifying QIS Goals: For modified Goal(s), indicate which Goal(s) you are modifying and 8c. state the new Goal(s) in the space provided below:

Goal 1

Goal 2

2023 Plan Year QIS Modification Summary Supplement OMB 0938-1286 Expiration Date: 02/29/2024

	Provide a rationale for the modification(s).  (500 character limit)
8d.	Modifying QIS Activities: If you are modifying activities, describe them here.  (500 character limit)
	Provide a rationale for the modification(s).  (500 character limit)
8e.	Modifying QIS Measures or Associated Performance Targets: For modified Measures or Associated Performance Targets, indicate which Measure(s) you are modifying and state the new Measure(s) and Performance Target(s).  Description of modification (e.g., remove measure, change measure or measure specifications change target, add new measure)  (500 character limit)

Expiration Date: 02/29/2024

$\Box$	1	4	I		_ 11	: £	1:	£		measure		I:	_	. 1
$\mathbf{-}$		COIDCE	วทก	nrowina	211	Intorn	ทวบก	TOT	Aacn	magerira	Which is	naina	cnander	1
	ıcasc	301001	anu	DIOVIGE	all	IIIIOII	nauon	101	Cacii	IIICasulc	WILLOW	Dellia	GHAHUGU	<i>1</i> .

Measure 1	a r	าam	ıe:
-----------	-----	-----	-----

ls t	his a National Quality Forum (NQF)-endorsed measure?	Yes	No
	If yes, provide the 4-digit ID number:		
Ba	seline Assessment: Provide the baseline results by either:		
•	Calculating the rate and providing the associated numerator and (Note: The numerator and denominator should calculate to the		
	Calculated Rate:		
	Numerator:		
	Denominator:		
	- OR -		
•	Indicating the data point if the measure is not a rate:		
	Data Point:		
	ovide the baseline performance period (i.e., month and year when ded) covered by the baseline data assessment:	data collection	n began and
	_		
poi	ovide the numerical value performance target for this measure (i.e. int the QIS intends to achieve):  ote: This entry should NOT be a percentage change but a numeri	-	te or data
Pro	ovide a rationale for the modifications.		
(50	0 character limit)		
	Measure 1b name:		
ls t	his a National Quality Forum (NQF)-endorsed measure?  If yes, provide the 4-digit ID number:	Yes	No

CMS, 7500 Security Boulevard, Attn: PRA Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850.

Yes

No

Expiration Date: 02/29/2024

Bas	seline Assessment: Provide the baseline results by <b>either</b> :
•	Calculating the rate and providing the associated numerator and denominator: ( <i>Note:</i> The numerator and denominator should calculate to the rate provided.)
	Calculated Rate:
	Numerator:
	Denominator:
	- OR -
•	Indicating the data point if the measure is not a rate:
	Data Point:
	ovide the baseline performance period (i.e., month and year when data collection began and ded) covered by the baseline data assessment:
	_
poi	ovide the numerical value performance target for this measure (i.e., the target rate or data int the QIS intends to achieve):  ote: This entry should NOT be a percentage change but a numerical value.)
Pro	ovide a rationale for the modifications.
(50	0 character limit)
	Measure 2a name:

CMS, 7500 Security Boulevard, Attn: PRA Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850.

Is this a National Quality Forum (NQF)-endorsed measure?

If yes, provide the 4-digit ID number:

Yes

No

Expiration Date: 02/29/2024

Baseline Assessment: Provide the baseline results by <b>either</b> :
Calculating the rate and providing the associated numerator and denominator:     ( <i>Note:</i> The numerator and denominator should calculate to the rate provided.)
Calculated Rate:
Numerator:
Denominator:
- OR -
Indicating the data point if the measure is not a rate:
Data Point:
Provide the baseline performance period (i.e., month and year when data collection began and ended) covered by the baseline data assessment:
_
Provide the numerical value performance target for this measure: ( <i>Note:</i> This entry should NOT be a percentage change but a numerical value.)
Provide a rationale for the modifications.
(500 character limit)
Measure 2b name:

Is this a National Quality Forum (NQF)-endorsed measure?

If yes, provide the 4-digit ID number:

Expiration Date: 02/29/2024

Baseline Assessment: Provide the baseline results by either:

•	Calculating the rate and providing the associated numerator and denominator: ( <i>Note:</i> The numerator and denominator should calculate to the rate provided.)
	Calculated Rate:
	Numerator:
	Denominator:
	- OR -
•	Indicating the data point if the measure is not a rate:
	Data Point:
	ovide the baseline performance period (i.e., month and year when data collection began and ded) covered by the baseline data assessment:
	-
poi	ovide the numerical value performance target for this measure (i.e., the target rate or data int the QIS intends to achieve):  ote: This entry should NOT be a percentage change but a numerical value.)
	ovide a rationale for the modifications.  O character limit)

CMS, 7500 Security Boulevard, Attn: PRA Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850.