# APPENDIX A

**ONE CARE PROGRAMMATIC REPORTING REQUIREMENTS**

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| **EOHHS is providing this appendix based on current information for reference only to provide context for Bidders. EOHHS will update this appendix as appropriate prior to EOHHS and selected Bidders executing any Contract resulting from this RFR.** |

This Appendix summarizes the reporting requirements described in the Contract. EOHHS may update these requirements from time to time. The Contractor may include a narrative summary to reports/submissions and may include graphs that explain and highlight key trends. For any report that indicates that the Contractor is not meeting the target, the Contractor shall submit a detailed narrative that includes the results, an explanation as to why the Contractor did not meet the target, and the steps the Contractor is taking to improve performance going forward.

The Contractor shall provide all Reports in the form and format required by EOHHS and shall participate with EOHHS in the development of detailed specifications for these reports. These specifications shall include benchmarks and targets for all reports, as appropriate.

All exhibits referenced herein pertain to **Appendix A**, unless otherwise noted. Such exhibits set forth the form and format the Contractor shall use for each report below. These exhibits shall be provided to the Contractor and may be updated by EOHHS from time to time. EOHHS shall notify the Contractor of any updates to the exhibits.

**Reporting Deliverable Schedule**

1. **Same Day Notification (Immediate Notice Upon Discovery):** Deliverables due the same day as discovery. If the incident occurs on a Saturday, Sunday, or state or federal holiday, the notice is due the next business day.
2. **Weekly Deliverables:** Deliverables due by close of business/COB on Fridays
3. **No later than 30 days prior to execution:** Deliverables due thirty calendar days prior to implementation for review and approval by EOHHS.
4. **Monthly Deliverables:** Deliverables due on a monthly basis, by the last business day of the month, following the month included in the data, unless otherwise specified by EOHHS.
5. **Quarterly Deliverables:** Deliverables due on a contract year (CY) quarterly basis, by the last business day of the month following the end of each quarter, unless otherwise specified.

CY Quarter 1: January 1 – March 31

CY Quarter 2: April 1 - June 30

CY Quarter 3: July 1 – September 30

CY Quarter 4: October 1 – December 31

1. **Semi-Annual Deliverables:** Deliverables due by the last business day of the month following the end of the reporting period, unless otherwise specified. The semi-annual reporting periods are as follows:

January 1 – June 30

July 1 – December 31

1. **Annual Deliverables**: Deliverables due by the last business day of the month following the end of the reporting period (Contract Year: January 1 -- December 31), unless otherwise specified by EOHHS.
2. **Ad-Hoc Deliverables**: Deliverables are due whenever the Contractor has relevant changes or information to report, or upon EOHHS request.
3. **Report and Compliance Certification Checklist: Exhibit C-2**

*Annually* - The Contractor shall list, *check off,* sign and submit a Certification of Data Accuracy for all Contract Management, Program Integrity, Organizational, Financial, Operations, and Quality reports/submissions, certifying that the information, data and documentation being submitted by the Contractor is true, accurate, and complete to the best of the Contractor’s knowledge, information and belief, after reasonable inquiry. For each report in the sections below, if an attestation is required with the submission, that information will be included within the reporting template.

1. **Contract Management Reports**

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| **One Care**  **Contract Exhibit Number** | **Name of Report** | **Deliverable Frequency** |
| CM -1 | Access and Availability Summary: |  |
| CM-1-A | Geographic Access Report | Annually |
| CM-1-B | Ratio Reports: PCP to Enrollee | Annually |
| CM-1-C | Ratio Reports: Specialist to Enrollee | Annually |
| CM-1-D | Summary of Significant Changes in Provider Network | Annually |
| CM-1-E | Summary of Use of Out-of- Network Providers | Annually |
| CM -2 | Assessment Completion Report | Monthly |
| CM -3 | Appeals (Level 1) Report | Monthly |
| CM -4 | Call Center Monitoring Report | Monthly |
| CM -5 | Care Plan Completion Report | Monthly |
| CM -6 | Care Coordinator Staffing Report | Monthly |
| CM -7 | Claims Processing Report Regarding Timely Payments | Monthly |
| CM -8 | Corrective Action Plan | Ad-Hoc |
| CM -9 | Marketing Plan and Materials | Ad-Hoc |
| CM -10 | Complaints and Grievances Report | Monthly |
| CM -11 | Notification of Critical or Adverse Incidents | Ad-Hoc Notification: Same Day |
| CM -12 | Notification of Significant Changes in Provider Network | Ad-Hoc Notification: Same Day |
| CM -13 | Submission of Member Outreach and Education Schedule | Quarterly |
| CM-14 | Voluntary Disenrollment Report | Monthly |
| CM-15 | Accessibility and Accommodations Compliance | Annually |

1. **Program Integrity Reports**

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| **One Care**  **Contract Exhibit Number** | **Name of Report** | **Deliverable Frequency** |
| PI-1 | Anti-Fraud, Waste and Abuse Plan | Annually |
| PI-2 | Executive Order 504 Contractor Certification Form | At Contract Execution |
| PI-3 | Notification of For-Cause Provider Suspensions and Terminations | Ad-Hoc |
| PI-4 | Notification of Fraud and Abuse | Ad-Hoc |
| PI-5 | Notification of PCP Suspensions and Terminations | Ad-Hoc |
| PI-6 | Notification of Provider Exclusion | Ad-Hoc |
| PI-7 | Notification of Provider Failure to Credential or Re-Credential | Ad-Hoc |
| PI-8 | Notification of Provider Self-Reported Disclosures | Ad-Hoc |
| PI-9 | Program Integrity Compliance Plan | Annually |
| PI-10 | Response to Overpayments Identified by EOHHS | Ad-Hoc |
| PI-11 | Summary of Fraud and Abuse | Quarterly |
| PI-12 | Summary of Provider Overpayments | Semi-Annually |
| PI-13 | Material Subcontractor Corrective Action Report | Ad-Hoc |

1. **Organizational and Process Reports**

| **One Care**  **Contract Exhibit Number** | **Name of Report** | **Deliverable Frequency** |
| --- | --- | --- |
| OP-1 | Board of Directors List | As of contract effective date |
| OP-2 | Changes to Provider Credentialing Policies and Procedures | Annually |
| OP-3 | Executive Order 504 Contractor Certification Form | At Contract Execution |
| OP-4 | List of Key Personnel | Within 5 days of contract execution |
| OP-5 | Notification of Change in Board of Directors | Ad-Hoc |
| OP-6 | Notification of Required Self-Disclosure | Ad-Hoc Notification: Same Day |
| OP-8 | Organizational Chart | Annually |
| OP-9 | SDO-certified business checklist | Annually |
| OP-10 | Significant Organizational Changes, New Material Subcontractors, or Potential Business Ventures | Ad-Hoc |
| OP-11 | Staff Retention and Employee Turnover | Ad-Hoc |
| OP-12 | Updated Plan Provider Directory | Annually |
| OP-13 | Updated Provider Manual | Annually |

1. **Financial Reports**

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| **ACO**  **Contract**  **Exhibit Number** | **Name of Report** | **Deliverable Frequency** |

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| FR-01 | Alternative Payment Models (APM) Report | Ad-Hoc |
| FR-02 | Audited Financial Statements | Annually |
| FR-03 | Certification of Sound Financial Condition | Annually |
| FR-04-A | Cost Avoidance and Recovery Identification | Semi-Annually |
| FR-04-B | Cost Avoidance and Recovery Identification: Accident and Trauma | Semi-Annually |
| FR-05 | DOI Financial Reports | Quarterly |
| FR-06 | Provider Risk Arrangements | Ad-Hoc |
| FR-07 | Report on Any Default of the Contractor’s Obligations OR Financial Obligation To A Third Party. | Ad-Hoc |
| FR-08 | Service Organization Controls Type 1 (SOC1) report | Annually |
| FR-09 | Working Capital Requirement Notification | Ad-Hoc |
| FR-10 | Attestation Report from Independent Auditors on Effectiveness of Internal Controls | Annually |
| FR-11 | Notification of Potential Insolvency | Ad-Hoc Notification: Same Day |
| FR-12 | Notification to EHS Regarding Negative Change in Financial Status | Ad-Hoc Notification: Same Day |
| FR-13 | Outstanding Litigation Summary | Annually |
| FR-14 | Encounter Data Submission (Appendix XX) | Monthly |

1. **Quality Reports**

| **Contract Exhibit Number** | **Name of Report** | **Deliverable Frequency** |
| --- | --- | --- |
| QR-01 | **QR-01 Quality Improvement Goals ( QM/QI work plan)** | Annual |
| QR-02 | **QR-02 CAHPS Report (Submission of full CAHPS Report)**  CAHPS Report (Submission of full CAHPS Report) | Annual |
| QR-03 | **QR-03 External Research Project Notification**  External Research Project Notification | Ad-Hoc |
| QR-04 | **QR-04 External Audit/Accreditation**  External Audit/Accreditation | Ad-Hoc |
| QR-05 | **QR-05 HEDIS IDSS Report**  HEDIS IDSS Report | Annual |
| QR-06 | **QR-06 Performance Improvement Projects**  Performance Improvement Project Reports (Format for submission determined by and communicated by External Quality Review Organization). | Bi-Annual |
| QR-07 | **QR-07 Validation of Performance Measures**  Validation of Performance Measures | Ad-Hoc |
| QR-08 | **QR-08 Serious Reportable Events (SREs) and Provider Preventable Conditions (PPCs)**  Serious Reportable Events (SREs) and Provider Preventable Conditions (PPCs) (*including Health care Acquired Conditions (HCACs) and Other Provider Preventable Conditions (OPPCs)* | Notification: Within 30 calendar days of occurrence |
| QR-09 | **QR-09 Summary of Serious Reportable Events (SREs) and**  **Provider Preventable Conditions (PPCs)**  Summary of Serious Reportable Events (SREs) and Provider Preventable Conditions (PPCs) | Annual |
| QR-10 | **Five-year Health Equity Strategic Plan**  Five-year Health Equity Plan Progress Report | Annual |

1. **Operations Reports**

| **Contract Exhibit Number** | **Name of Report** | **Deliverable Frequency** |
| --- | --- | --- |
| OP-01 | Continuity of Operations Plan | Ad-Hoc |
| OP-02 | Address Change File | Bi-Weekly |
| OP-03 | Daily Inbound Demographic Change File | Daily |
| OP-04 | Enrollment and Payment Discrepancy Report | Weekly |
| OP-05 | Internal Management Report | Ad-Hoc |
| OP-06 | Excluded Provider Monitoring Report | Monthly |
| OP-07 | HIPAA 834 History Request File | Ad-Hoc |
| OP-08 | MDS-HC Submission | Ad-Hoc |
| OP-09 | Members boarding in Emergency Department or on Administratively Necessary Days (AND) status | Daily |
| OP-10 | LTSS Denials Process Audits | Ad-Hoc |
| OP-11 | Deemed Enrollment Status | Bi-weekly |
| OP-12 | One Care Provider File | Quarterly |

1. **FIDE SNP Reports**

| **Contract Exhibit Number** | **Name of Report** | **Deliverable Frequency** |
| --- | --- | --- |
| FS-01 | Medicare D-SNP Bid information | Annual |
| FS-02 | CAHPS and HEDIS Data and Reports | Annual |
| FS-03 | Applying for Frailty Adjuster; receipt of Frailty Adjuster | Annual |
| FS-04 | Medicare Risk Score data (Aggregate, by Rating Category, and at Enrollee level) | Monthly |
| FS-05 | Supplemental Benefits Proposed and/or Approval Status (projections of cost and utilization) | Annual |
| FS-06 | Details on actual utilization for Supplemental Benefits | Monthly |
| FS-07 | Star Rating Rebate % and PMPM | Annual |
| FS-08 | Medicare Audit processes, findings, and reports | Ad-Hoc |
| FS-09 | Medicare compliance and penalty information | Ad-Hoc |
| FS-10 | Participation in any Medicare VBP or APM initiatives, such as VBID | Ad-Hoc |
| FS-11 | Model of Care Submission, Scoring, and NCQA Feedback | Annual |