

Restructuring CCO Contract Deliverables

Survey Summary



June 2023

Oregon
Health
Authority

HEALTH SYSTEMS DIVISION

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LANGUAGE ACCESS AND ACCOMMODATION

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REPORT COMPILED BY CCO OPERATIONS

For questions, please contact HSD.QualityAssurance@odhsoha.oregon.gov.

BACKGROUND

In April 2023, the CCO Quality Assurance & Contract Oversight team created formal opportunities to gather feedback about CCO Contract Deliverables, including the processes for submitting and reviewing deliverables.

Two surveys were created to ask meaningful questions about specific deliverables, to better understand how OHA can reduce administrative burden, increase efficiency, and ensure deliverables are useful to both CCO and OHA staff.

SURVEY SETUP AND PARTICIPANTS

The surveys asked questions about CCO Contract Deliverables in the [2023 CCO Contract](#), outlined in [Exhibit D, Attachment 1](#). The survey included 70 deliverables and excluded deliverables without a scheduled timeframe for submission, also known as *ad hoc* deliverables.

Survey invitations were shared directly with CCO Contract Contacts, OHA evaluation staff, and via the [CCO Weekly Update](#). The surveys were open between April 11 and April 25.

Feedback key: CCO OHA

Responses included:

CCO staff participant breakdown			
Total: 139 responses			
CCO NAME	RESPONSES	CCO NAME	RESPONSES
Advanced Health	15	IHN CCO	15
AllCare CCO	23	Jackson Care Connect	11
Cascade Health Alliance	5	PacificSource	1
Columbia Pacific CCO	10	Trillium Community Health Plan	7
Eastern Oregon CCO	2	Umpqua Health Alliance	22
Health Share of Oregon	21	Yamhill Community Care	7

OHA staff participant breakdown		
Total: 51 responses		
DIVISION	RESPONSES	UNIT REPRESENTATION
Equity and Inclusion	5	Health Equity and Policy – 1; REALD & SOGI - 2 Diversity and Inclusion – 2
Fiscal and Operations	3	Office of Actuarial and Financial Analytics – 1; Program Integrity – 1; Policy - 1
Health Policy and Analytics	11	Pharmacy Policy and Programs – 3; Transformation Center – 5; Quality Metrics – 1; Health Information Technology – 1; Quality Improvement - 1
Health Systems	27	Child and Family Behavioral Health – 2; Intensive Services – 3; Behavioral Health Policy and Planning – 1; Governance & Business Operations – 1; CCO Quality Assurance – 11; CCO Services – 2 ; Claims and Encounter Data – 1; Federal Medicaid Policy - 1 Traditional Medicaid Programs - 5
Public Health	1	Maternal and Child Health - 1
Office of Payment and Recovery	4	Personal Injury Liens – 1; Health Insurance – 3

SURVEY DATA

Data from both the CCO staff and OHA staff surveys will be shared for transparency and to ensure any insights captured are available to plans, partners, and other stakeholders. Names and contact information will be removed, but all other text will be shared verbatim.

Data will be made available on the [CCO Quality Assurance page](#).

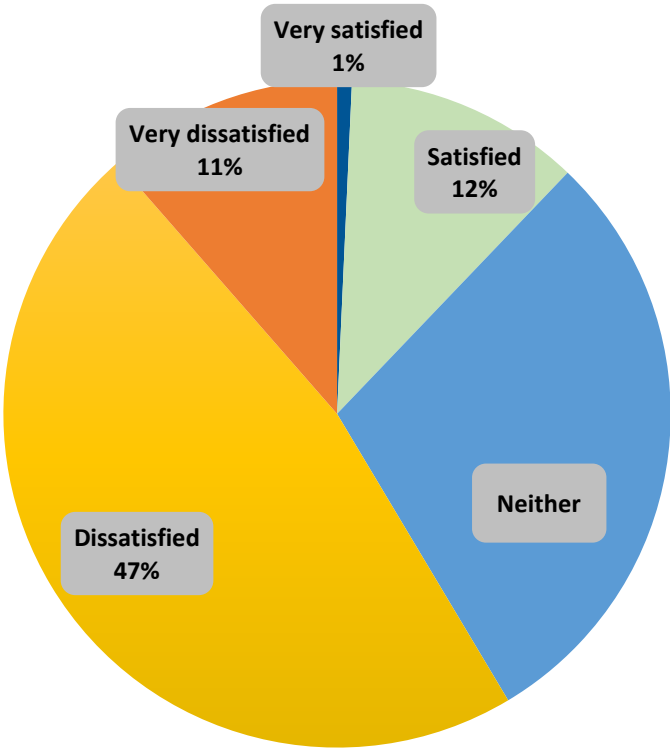
POTENTIAL FOCUS AREAS

Based on analysis of survey responses, the following focus areas have been identified:

- Redistribute deliverable due dates with consideration to staff resources needed and type of deliverable.
 - Special emphasis on redistributing Q1 deliverables.
- Add clear due dates for OHA feedback.
 - When can CCOs expect to receive responses?
 - Include due date field in new system.
- Ensuring strict adherence to sharing guidance and evaluation criteria at least 90 days in advance.
- Combine or reduce narrative requirements.
- When deliverable requires both quarterly and annual reporting of the same information, reduce to a single annual report.
- Combine deliverables that report similar data or serve similar functions.
- Create site for CCOs to upload and track deliverable submissions, submit large files, and submit secure data.

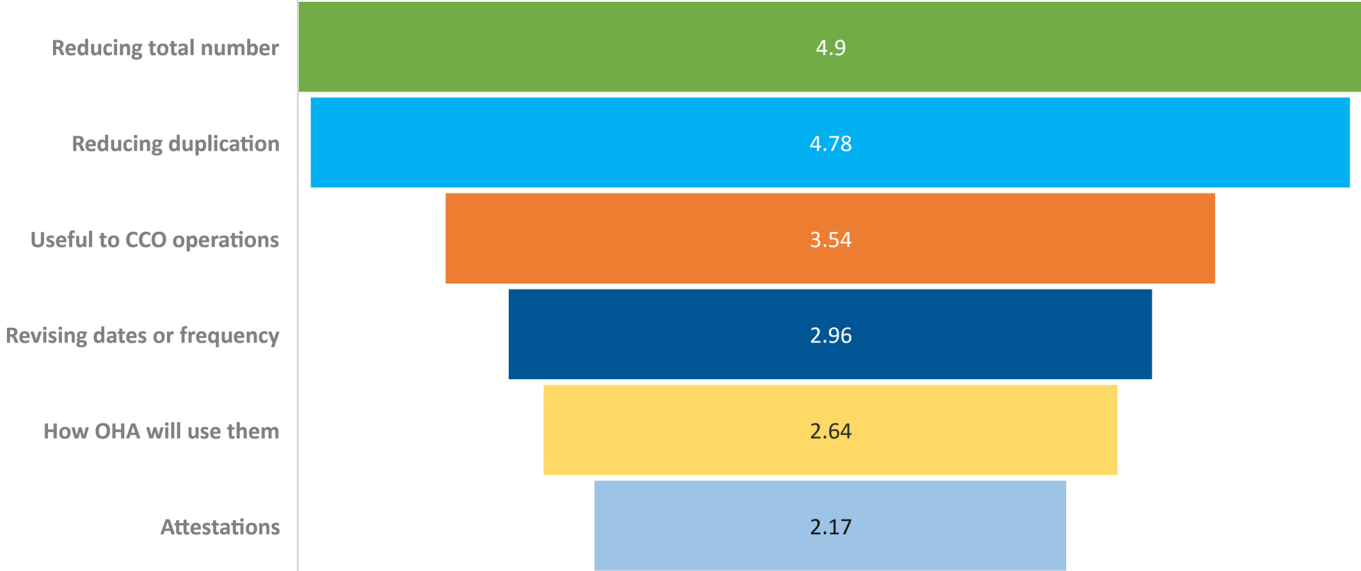
FEEDBACK AT A GLANCE

CCOs: Overall, how satisfied are you with the Contract Deliverables process?



CCOs: Rank the most important outcome of restructuring deliverables

5 = highest priority, 1 = lowest priority



Feedback key:	CCO	OHA
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Overall feedback

Most feedback received: Top 10

CCO staff were allowed to provide targeted feedback for up to 70 deliverables.

DELIVERABLE NAME	NUMBER OF RESPONSES	RATING 1-5 STARS
Transformation and Quality Strategy (TQS)	41	2.1
Health Equity Plan (HEP), Training and Education report, HEA Progress Report	32	2.65
Member Handbook	30	3.3
Community Health Improvement Plan (CHP)	28	4
Health Information Technology (HIT) Roadmap and Data	27	3.43
Delivery System Network (DSN) Provider Capacity Report - Annual or Quarterly	26	2.25
Community Health Assessment (CHA)	26	3
Subcontractor and Delegated Work Report	25	2.15
System of Care (SOC) policies and procedures	25	1.5
Grievance and Appeal System Quarterly Report	24	3

Overall Ratings: Top 10 / Bottom 10

CCO staff were asked to rate individual deliverable satisfaction, on a scale from 1 to 5 stars.

RANK	DELIVERABLE NAME	NUMBER OF RESPONSES	RATING 1-5 STARS
1	Change in Controlling interest	5	5
2	Lien Release and Lien Filing Templates	9	5
3	Perinatal care coordination and Family Connects Oregon contact	11	5
4	Third Party Liability Recovery (TPLR) Policies and Procedures	11	5
5	Personal Injury Liens (PIL) Policies and Procedures	11	5
6	P4P PBM Subcontract Admin Costs Quarterly Reports	7	4
7	CMS Drug Utilization Review Survey	8	4
8	Family Connects Oregon Community Alignment Report	12	4
9	Quality Pool Participating Providers Report	12	4
10	Community Health Improvement Plan (CHP)	28	4
<hr/>			
61	Annual Behavioral Health Report	17	1.33
62	NEMT QA quarterly reports	15	1.33
63	National Association of Insurance Commissioners (NAIC) A-D and F Forms	9	1.33
64	Grievance and Appeal System Policies and Procedures	18	1.25
65	Health-Related Service Policies	24	1
66	LTSS MOU Coordination Activities and Metrics	20	1
67	Subcontractor Performance Report	19	1
68	Behavioral Health Qualified Directed Payment (BH QDP) Attestation	16	1
69	Interpreter Services Self-Assessment	16	1
70	IIBHT report on referrals, public communication, and provider capacity building	15	1

Resources needed to prepare submission: Top 10

CCO staff were asked to identify the number of staff and total hours needed for deliverable preparation.

DELIVERABLE NAME	PERCENTAGE WHO AGREE MULTIPLE STAFF NEEDED	PERCENTAGE WHO AGREE / TOTAL HOURS NEEDED			
		15+ hours	10-15 hours	5-10 hours	< 5 hours
Transformation and Quality Strategy (TQS)	76.92%	94.87%	5.13%	0	2.56%
Health Equity Plan (HEP), Training and Education report, HEA Progress Report	80.65%	90.32%	9.68%	0	0
Community Health Assessment (CHA)	75.00%	87.50%	8.33%	4.17%	0
Annual Comprehensive Behavioral Health Plan update and progress report	80%	86.67%	6.67%	0	6.67%
Annual Behavioral Health Report	85.71%	85.71%	14.29%	0	0
Community Health Improvement Plan (CHP)	76.92%	84.62%	7.69%	7.69%	0
Health Information Technology (HIT) Roadmap and Data	68.00%	84.00%	8.00%	4.00%	4.00%
FWA Assessment Report	43.75%	81.25%	12.50%	0	0
Delivery System Network (DSN) Provider Capacity Report - Annual or Quarterly	75.00%	79.17%	16.67%	0	0
CHP Progress Report	75.00%	75.00%	20	10	0

Please note: Percentages are based on responses to individual question.

Used in internal CCO operations: Top 10 / Bottom 10

CCO staff were asked if the information prepared for the deliverable is used for internal operations.

RANK	DELIVERABLE NAME
1	FWA Prevention Plan
2	CMS Drug Utilization Review Survey
3	Member Materials, Marketing, Education and Information
4	Long Term Services and Supports (LTSS) MOU Updates
5	Member Handbook
6	Pharmacy Benefit Manager (PBM) market check findings
7	Grievance and Appeal Member Notice Templates
8	BH QDPs Provider webpage URL
9	NEMT Rider Guide
10	Lien Release and Lien Filing Templates
61	THW Payment Grid
62	Delivery System Network (DSN) Provider Capacity Report - Annual or Quarterly
63	Care Coordination Activities Report
64	Annual Report with facility-level data about all Members who are assigned to a PCPCH Provider
65	Bi-Annual Reports for SOC Statewide Steering Committee
66	IIBHT report on referrals, public communication, and provider capacity building
67	Perinatal care coordination and Family Connects Oregon contact
68	Organizational chart or interrelationships list
69	Annual Behavioral Health Report
70	Family Connects Oregon Community Alignment Report

Feedback about duplication

Feedback key:	CCO	OHA
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Overlap between CCO and OHA staff answers are highlighted in green or yellow, respectively.

CCO staff - Most duplicative information: Top 10

CCO staff were asked if there is another deliverable that requests the same information.

DELIVERABLE NAME	PERCENTAGE WHO AGREE DELIVERABLE HAS DUPLICATIVE INFO
Health Equity Plan (HEP), Training and Education report, HEA Progress Report	93.33%
Annual Comprehensive Behavioral Health Plan update and progress report	75.00%
Transformation and Quality Strategy (TQS)	66.67%
Subcontractor Performance Report	63.64%
Member Handbook	62.50%
CHP Progress Report	57.14%
Traditional Health Worker (THW) Integration and Utilization Plan	57.14%
SHARE Initiative Spending Proposed Plan	57.14%
THW Integration and Utilization Report	57.14%
SHARE Spending Report	57.14%

Please note: Percentages are based on responses to this individual question.

OHA staff - Most duplicative information: Top 10

OHA staff were asked if there is another deliverable that requests the same or similar information.

DELIVERABLE NAME	PERCENTAGE WHO AGREE DELIVERABLE HAS DUPLICATIVE INFO
Interpreter Services Self-Assessment	100.00%
Intensive Care Coordination (ICC) Policies & Procedures	100.00%
Organizational chart or interrelationships list	100.00%
Annual Comprehensive Behavioral Health Plan update and progress report	100.00%
Language Access and Interpreter Services Quarterly Reports	67.00%
Subcontractor Performance Report	67.00%
NEMT Rider Guide	50.00%
Care Coordination Activities Report	50.00%
Transformation and Quality Strategy (TQS)	50.00%
SHARE Spending Report	50.00%

Please note: Percentages are based on responses to this individual question.

Feedback about restructuring

How each deliverable should change

CCO staff were asked how OHA should change individual deliverables, including changing format and schedule, combining deliverables, moving to attestation only, and removal.

DELIVERABLE NAME (Ordered by most to least responses received)	DON'T CHANGE	CHANGE FORMAT	CHANGE TO AD HOC	COMBINE WITH ANOTHER	ATTESTATION ONLY	REMOVE	NONE OF THE ABOVE	# OF RESPONSES
Transformation and Quality Strategy (TQS)	7.69%	38.46%	7.69%	7.69%	7.69%	7.69%	23.08%	13
Health Equity Plan (HEP), Training and Education report, HEA Progress Report	0	60.00%	0	20.00%	0	0	20.00%	10
Member Handbook	0	66.67%	0	0	0	0	33.33%	3
Community Health Improvement Plan (CHP)	0	0	0	50.00%	0	0	50.00%	2
Health Information Technology (HIT) Roadmap and Data	20.00%	0	40.00%	0	0	20.00%	20.00%	5
Delivery System Network (DSN) Provider Capacity Report - Annual or Quarterly	20.00%	0	0	0	0	0	80.00%	5
Community Health Assessment (CHA)	0	100%	0	0	0	0	0	1
Subcontractor and Delegated Work Report	20.00%	60.00%	20.00%	0	0	0	0	5
System of Care (SOC) policies and procedures	0	0	25.00%	0	75.00%	0	0	4
Grievance and Appeal System Quarterly Report	0	100	0	0	0	0	0	2
Health-Related Service Policies	0	0	50.00%	0	50.00%	0	0	2
FWA Audit Report - Quarterly or Annual	0	50.00%	0	33.33%	16.67%	0	0	6
Grievance and Appeal System Log and all ABA and Hep C NOABDs	20.00%	60.00%	0	0	0	20.00%	0	5
Language Access and Interpreter Services Quarterly Reports	0	28.57%	0	0	14.29%	14.29%	42.86%	7
Mental Health Parity analysis documentation	0	0	0	0	66.67%	33.33%	0	3
Quarterly PIP Progress Reports	0	0	0	0	0	100%	0	1
Grievance and Appeal Member Notice Templates	16.67%	50.00%	16.67%	0	0	0	16.67%	6
CHP Progress Report	0	100%	0	0	0	0	0	2
Organizational chart or interrelationships list	0	0	50.00%	50.00%	0	0	0	6
CAC Member Demographic Report - Annual	0	33.33%	0	33.33%	0	0	33.33%	3
Behavioral Health Policies and Procedures	0	0	20.00%	0	20.00%	40.00%	20.00%	5
Quality Pool Distribution Plan	0	0	33.33%	0	0	66.67%	0	3
Intensive Care Coordination (ICC) Policies & Procedures	20.00%	0	0	0	60.00%	20.00%	0	5
LTSS MOU Coordination Activities and Metrics	0	60.00%	0	0	0	20.00%	20.00%	5
Subcontractor Performance Report	0	0	0	0	0	100%	0	4
Long Term Services and Supports (LTSS) MOU Updates	0	25.00%	25.00%	0	0	25.00%	25.00%	4
FWA Referrals and Investigations Report - Quarterly or Annual	0	0	0	66.67%	0	33.33%	0	6
Annual Comprehensive Behavioral Health Plan update and progress report	0	0	0	60.00%	0	20.00%	20.00%	5
SHARE Spending Report	50.00%	0	0	0	0	50.00%	0	2
Fraud, Waste and Abuse (FWA) Prevention Handbook	0	50.00%	0	0	25.00%	25.00%	0	4
Grievance and Appeal System Policies and Procedures	0	0	0	0	0	33.33%	66.67%	3
SHARE Initiative Spending Proposed Plan	50.00%	0	0	0	0	0	50.00%	2
Wraparound policies and procedures	0	0	50.00%	0	50.00%	0	0	2
FWA Assessment Report	0	0	0	50.00%	0	0	50.00%	2
Annual Behavioral Health Report	0	0	0	0	0	75.00%	25.00%	4
Care Coordination Activities Report	0	33.33%	0	33.33%	0	0	33.33%	3

Please note: Percentages are based on responses to this individual question.

How each deliverable should change (continued from previous page)

CCO staff were asked how OHA should change individual deliverables, including changing format and schedule, combining deliverables, moving to attestation only, and removal.

DELIVERABLE NAME (Ordered by most to least responses received)	DON'T CHANGE	CHANGE FORMAT	CHANGE TO AD HOC	COMBINE WITH ANOTHER	ATTESTATION ONLY	REMOVE	NONE OF THE ABOVE	# OF RESPONSES
NEMT Rider Guide	0	50.00%	0	0	0	0	50.00%	2
Traditional Health Worker (THW) Integration and Utilization Plan	0	33.33%	0	0	0	0	66.67%	3
Behavioral Health Qualified Directed Payment (BH QDP) Attestation	0	100%	0	0	0	0	0	1
FWA Prevention Plan	0	0	100%	0	0	0	0	1
Interpreter Services Self-Assessment	0	0	0	0	0	0	100%	1
IIBHT report on referrals, public communication, and provider capacity building	0	0	0	33.33%	0	66.67%	0	3
VBP Interview Questionnaire	0	0	0	100%	0	0	0	1
NEMT Policies and Procedures	0	50.00%	0	0	25.00%	25.00%	0	4
NEMT Call Center script	0	0	33.33%	0	33.33%	33.33%	0	3
NEMT QA quarterly reports	0	33.33%	0	0	0	0	66.67%	3
Bi-Annual Reports for SOC Statewide Steering Committee	0	100%	0	0	0	0	0	1
THW Integration and Utilization Report	0	100%	0	0	0	0	0	1
THW Payment Grid	0	100%	0	0	0	0	0	1
Value-Based Payment (VBP) Designee	0	0	100%	0	0	0	0	2
Annual Report with facility-level data about all Members who are assigned to a PCPCH Provider	0	50.00%	0	0	0	50.00%	0	2
Member Materials, Marketing, Education and Information	0	0	33.33%	0	0	33.33%	33.33%	3
PCPCH VBP Data and Care Delivery Area VBP Data template	0	0	0	100%	0	0	0	1
Quality Pool Participating Providers Report	0	0	0	0	0	50.00%	50.00%	2
Family Connects Oregon Community Alignment Report	0	0	66.67%	0	0	33.33%	0	3
Perinatal care coordination and FCO contact	50.00%	0	0	50.00%	0	0	0	2
Preferred Drug List and Prior Authorization criteria	33.33%	33.33%	0	0	0	33.33%	0	3
Personal Injury Liens (PIL) Policies and Procedures	33.33%	0	66.67%	0	0	0	0	3
Third Party Liability Recovery (TPLR) Policies and Procedures	100%	0	0	0	0	0	0	1
Moral objections policy	0	0	66.67%	0	0	33.33%	0	3
NAIC A-D and F Forms	0	0	0	33.33%	0	66.67%	0	3
Pharmacy Benefit Manager (PBM) market check findings	0	0	33.33%	0	0	33.33%	33.33%	3
Lien Release and Lien Filing Templates	50.00%	0	50.00%	0	0	0	0	2
CMS Drug Utilization Review Survey	0	100%	0	0	0	0	0	1
P4P PBM Subcontract Admin Costs Quarterly Reports	0	0	0	0	0	0	100%	1
Change in Controlling interest	0	0	100%	0	0	0	0	1
Affiliated Medicare Advantage Report	n/a*	n/a*	n/a*	n/a*	n/a*	n/a*	n/a*	0
BH QDPs Provider webpage URL	n/a*	n/a*	n/a*	n/a*	n/a*	n/a*	n/a*	0
Website posting w/ BH and SUD educational info	n/a*	n/a*	n/a*	n/a*	n/a*	n/a*	n/a*	0
Crossover claims for affiliated MA and DSN Plans	n/a*	n/a*	n/a*	n/a*	n/a*	n/a*	n/a*	0
OVERALL TOTAL	17.54%	6.64%	8.06%	13.27%	24.64%	18.48%	11.37%	211

Please note: Percentages are based on responses to this individual question. *n/a = No response.

GENERAL COMMENTS

COMMENTS FROM CCO STAFF

CCOs: Do you have comments about the overall Contract Deliverables process?

CCO Responses: 53 out of 139 (*Comments are verbatim*)

TYPE	#	COMMENT
CCO	1	It feels like there are a ton of deliverables that lead to duplication of information. Consolidation of some would be helpful given that they all go to the same regulatory organization.
CCO	2	How do we work together, to combine elements of multiple deliverables, and OHA divisions for accountability at the OHA and the CCOs. The Public Health division also fails to enforce the same requirements in their contracts, which creates great difficulty for the CCO to implement change in the region.
CCO	3	The deliverable dates.
CCO	4	Would like to see guidance and templates posted to CCO Contracts form page at least 6 months in advance of deliverable due date. Report coding and prioritization is often a scramble under current posting timelines.
CCO	5	Having an automated portal (such as CMS uses with HPMS) would help plans automate some of the submissions, as well as be able to see status. I realize that's a long-term goal, but would help OHA to organize and maintain submission more effectively.
CCO	6	Inter-rater reliability
CCO	7	Be wary of how much duplicative submissions or other submissions that have impact on departments that are providing information for multiple submissions.
CCO	8	Not all the required contract deliverables and due dates are listed on the the Exhibit D Attachment 1. This is deceiving in that the administrative load is larger than what is reflected on the list.
CCO	9	Last minute changes to deliverables is challenging especially when the deliverable relies on historic data collection. There is inconsistency across OHA regarding how deliverables are reviewed and at times it appears that some required changes are more a matter of an OHA staff person's personal viewpoint/preferences than being driven by the actual contract language. While there has been improvement in this area (which is much appreciated), it is still an ongoing concern.
CCO	10	I would love to see a submission process that includes more transparency into the status of our submissions. For example, a dashboard or tracker that includes submission deadlines, dates of submission, when OHA will return deliverables back to us, etc. I would also like to see a submission process via an online portal, rather than through email.
CCO	11	Being able to see OHA's share point page as a view-only on how they are tracking our deliverable submission would be very helpful. We are tracking our submission to OHA in share point, so if we could mirror naming conventions, deliverable information, etc. I feel like our information we are providing to OHA would be more accurate and aligned with what they are expecting.
CCO	12	Recommend an OHA SharePoint site to submit all deliverables to rather than through email for better tracking purposes.

CCO	13	The CCO deliverables tracker is incomplete: does not include all ad hoc and known deliverables. Late changes in templates, late release of new templates/guidance documents, and/or errors in provided templates. Application of commercial or other Non-OHP business based reports/structures to OHP prove to be cumbersome and misaligned.
CCO	14	With regards to Grievance System Reporting, our interactions with OHA have been very helpful. Thank you for always taking a collaborative approach to problem-solving.
CCO	15	There are several deliverables that have cross over or for the policies and procedures where multiple policies fall under multiple sections. Review timeline of deliverables to ensure that certain months are not heavier than others.
CCO	16	We appreciate the opportunity to provide feedback on how best to restructure the process for CCO deliverables. Our primary goal of this restructuring is to reduce the significant amount of time our organization and network of care providers must invest in their preparation and submission. Two of the most important ways we can do this are 1) Eliminating duplicative submissions by identifying opportunities for the same data to be used by different OHA departments for multiple purposes, and 2) Stabilizing the standards by which deliverables are evaluated so that CCOs can rely on a more predictable and replicable process for compiling and submitting the required data.
CCO	17	Thank you for the opportunity to provide feedback on this process! I appreciate the OHA's openness to CCO feedback on this process. It would be helpful to look at all the deliverables required, the amount of time CCOs take to complete them, and the functional/operational team(s) likely supporting the work (e.g. care coordination, pharmacy, provider networks, etc). There are a lot of pressure to staff in the first 4 months of the year to support the reporting process. Some balancing out of deliverable due dates throughout the year would be helpful to minimize impact on operations. The 'time spent' measure that you ask in this survey is not an appropriate scale to fully capture the time CCOs are spending on deliverables. The scale should go up to at least 100 hours. If the OHA could review the time spent by CCO on deliverables, assess if they are still serving a purpose, and consider removing some deliverables or simplifying the reporting requirements, that would be helpful.
CCO	18	Timely feedback is important and sometimes missed. The Health Equity Plan is the most current example of this pain point. A 60-90 day turnaround would be appreciated.
CCO	19	I appreciate the opportunity to provide feedback on how best to restructure the process for CCO deliverables. Our primary goal of this restructuring is to reduce the significant amount of time our organization and network of care providers must invest in their preparation and submission. Two of the most important ways we can do this are 1. Eliminating duplicative submissions by identifying opportunities for the same data to be used by different OHA departments for multiple purposes, and 2. Stabilizing the standards by which deliverables are evaluated so that CCOs can rely on a more predictable and replicable process for compiling and submitting the required data. My experience with these deliverables is that they are largely restatements of contract language or OAR, which does not feel meaningful. It is not clear to me how OHA used the deliverables I sent in.
CCO	20	If OHA can not attend to the commitments on their end for administering these deliverables, how can we be expected to attend on our side? For example, we did not receive feedback on the health equity plan last year until a year after it was submitted, and once the next report was already due! We haven't received any feedback on this year's report. The templates for reporting are consistently late too.
CCO	21	I appreciate the opportunity to provide feedback on how best to restructure the process for CCO deliverables. Our primary goal of this restructuring is to reduce the significant amount of time our organization and network of care providers must invest in their preparation and submission. Two of the most important ways we can do this are: 1. Eliminating duplicative submissions by identifying

		opportunities for the same data to be used by different OHA departments for multiple purposes, and 2. Stabilizing the standards by which deliverables are evaluated so that CCOs can rely on a more predictable and replicable process for compiling and submitting the required data.
CCO	22	In general, it would be most helpful to provide clear and concise direction and feedback to CCO's regarding deliverables. Sending deliverables back and forth multiple times is not a good use of time for either the CCO or reviewer. Deliverables take hundreds of hours of staff time to prepare, review guidance, revise and proofread. Transparent communication regarding deliverable expectations is needed to streamline this process.
CCO	23	It would be nice if we receive findings (if applicable) for the prior year earlier than 3-4 or more months later. When it is received late; if we submit a new quarterly report we are already in non-compliance.
CCO	24	Would recommend only needing to submit attestations only, when contract or OAR language does not change. Similarly, waive annual policy review if that topic will be covered in compliance monitoring review. Overall, Q1 of each year requires many submissions recommend OHA look at overall schedule to better align with EQR activity. EOCCO would recommend streamlining the evaluation/feedback process and provide feedback in a timely manner (30 days). Also, we do not receive feedback on all deliverables, so assume no news is good news. We'd appreciate more transparent consideration of this feedback and receive updates from OHA on progress on an ongoing basis.
CCO	25	I suggest combining the P&P deliverables into an annual attestation. At the very least, I suggest removing the elements requiring duplicate information to be required across many P&Ps or requiring CCOs to make P&P changes that run counter to the documents' usefulness in CCO operations. I suggest combining the "contact point" deliverables, both the scheduled and the ad hoc ones, into one annual confirmation/change with the expectation that CCOs will provide updates throughout the year if things change. I would like to have more information about what OHA considers useful in each deliverable and how OHA plans to use the information. That would help us to better understand what is needed so we can provide more useful information. Feedback cycles are inconsistent in both timing and reviewer interpretations, especially from year to year. Often the reviewer feedback is not sent to our contract administration contacts. We have missed some feedback and expected revision deadlines because of this. We have also been late in operationalizing other changes because we didn't receive timely feedback. Where are all the publicly posted deliverables being posted? We know of some of the locations, but many are not listed. For example, all of the P&Ps. Some of the deliverables marked as public posting are not suitable for public posting, such as some FWA deliverables, DSN provider capacity reports, MH Parity data, quarterly NEMT QA reports, quarterly language access and interpreter services reports. These reports contain sensitive member and/or provider information. The CCO Contract Forms page is difficult to navigate to find information quickly. The options for "time needed to prepare deliverables" in this survey were not sufficient to show the amount of time required for the large data reports (MH Parity in particular), the large narrative reports (TQS, Health Equity Plan, DSN Narrative, CHIP Progress Reports, CHA, CHIP, THW deliverables, Comprehensive BH Plan, HIT Roadmap, SHARE Initiative), many of the combination data/narrative reports (Care Coordination Activities, LTSS MOU Activities, Affiliated MA Advantage Report, HepC report), and the member materials (Member Handbook, NEMT Rider Guide, G&A Letter Templates). Those all take significantly more than 15 hours per deliverable. Most of the narrative reports end up taking over a hundred hours of staff time to read guidance, attend TA sessions, write, review, revise, proofread, and format. We have submitted hundreds and hundreds of pages of narrative. Many of those narrative reports are not valuable operationally to the CCO and of questionable value to OHA. We may have all had a better understanding of OHA's expectations and CCO performance if those had been interviews/discussions rather than novel-length documents. Many of the lengthy narrative deliverables have the same or nearly the same due date, and involve many of the same staff at our CCO. March 15 and June 30 are particularly challenging.
CCO	26	Interrater reliability has been a significant challenge.

CCO	27	<p>I appreciate the opportunity to provide feedback on the process and structure of CCO deliverables. Given the significant amount of time and effort our organization and network of care providers invest in preparing and submitting these deliverables, our primary goal is to ensure they result in a correspondingly significant improvement in member quality of care. To that end I recommend that OHA thoroughly review each deliverable asking the questions, “does OHA have the immediate ability to digest, utilize and provide meaningful feedback on this deliverable” and “does this deliverable improve quality of care?” then share those answers with CCOs. Each deliverable should also be scrubbed for redundancy. By focusing on the most impactful deliverables and using the data provided for multiple purposes we would hope to reduce the overall volume of deliverable submissions. I would also like to see OHA improve the submission process allowing for more streamlined secure submissions. As much as possible it would be good to keep deliverables the same over the duration of a contracting period. Finally, if an approach to measuring performance (delivery system capacity, for example) is deemed adequate one year it should not change the next year, requiring different explanations for underlying and established processes. At times, despite what are certainly best intentions, these reports can feel like book reports and writing exercises rather than meaningful reflections of the work happening on the ground. Slight changes to wording or emphasis in the questions often lead to completely rewriting descriptions of the same process, which is perhaps more intensive than intended. We appreciate the values that the OHA staff bring to the CCO effort and to ensuring we are all moving toward health equity. The overall number of deliverables, and the infrastructure needed simply to report on those deliverables (separate from the infrastructure needed to actually do the work) is at times overwhelming, given the real transformation and operational goals of Oregon's Medicaid program. Thank you for fielding this survey, and for OHA's on-going partnership.</p>
CCO	28	No
CCO	29	<p>Inconsistent criteria among multiple reviewers with sometimes very minor (nit picky) feedback; multiple resubmissions which bump up against other deliverables; often feedback is delayed and untimely; no coordination between multiple deliverables/timelines; no consistent SFTP site to submit deliverables which can lead to confusion.</p>
CCO	30	<p>There are few, if any, staff left at HSD that are helpful and knowledgeable about these BH CCO deliverables. The amount of time that they are spending on these has to be frustrating for them as well because it is all for very little value. None of these are currently offering a value worth the admin time it takes for CCO staff or OHA/HSD staff to complete/review the deliverable.</p>
CCO	31	<p>It's replicative and feedback is not timely. Sometimes, the feedback is from a name that is not recognized. It takes me 1 1/2 hours/day to review all correspondence from OHA to try and make sure we do not miss a deliverable, or forward feedback emails to the right person. The resubmissions also have their own 'due date' - another date to manage and make sure it is submitted on time.</p>
CCO	32	<p>Too many, too often. We understand the need for information to support the dollars that the CCOs receive, but this is out of control.</p>
CCO	33	<p>- Reviewers often do not understand what they are reviewing - Reviewers will grade deliverables on things that are not in guidance documents - There is no standardization of the review process - The feedback is often trivial comments - There is no review of duplicative documents submitted to the OHA or HSAG - Feedback often comes back too late or given out over major holidays with extremely short deadlines - There is no coordination between teams receiving deliverables - HIT date template is pretty good (should be included on the Deliverables) -Multiple deliverable locations - need one location *****This survey is way too limiting. There are many more concerns then what can be commented*****</p>

CCO	34	The files for some of the submissions are so large that it takes several email (FWA submission was 8 emails) to submit one deliverable. It would be useful to have a SFTP site or an OHA secure site like HSAG Safe Site.
CCO	35	Too cumbersome and too many deliverables, time should be spent taking care of the members, providers, and community than completing all the deliverables that don't really matter.
CCO	36	Please work to streamline this process, add new projects into existing deliverables, move to stable, quarterly reports.
CCO	37	Response is slow and sometimes does not occur at all. Feedback is inconsistent- it is clear that different reviewers are being used without any inter-rater reliability. Subject matter proficiency of reviewers is not always evident. We frequently pass the first review for elements in a deliverable only to have the second review flag approved elements for correction.
CCO	38	I appreciate the opportunity to provide feedback on how best to restructure the process for CCO deliverables. Our primary goal of this restructuring is to reduce the significant amount of time our organization and network of care providers must invest in their preparation and submission. Two of the most important ways we can do this are 1. Eliminating duplicative submissions by identifying opportunities for the same data to be used by different OHA departments for multiple purposes, and 2. Stabilizing the standards by which deliverables are evaluated so that CCOs can rely on a more predictable and replicable process for compiling and submitting the required data.
CCO	39	The only comment I have is the lack organization, direction and/or instructions to some of the OHA initiatives i.e. the new Ortho benefit or changes to the Network Adequacy Time and Distance Standards.
CCO	40	<p>"First off, we appreciate OHA making this opportunity to provide feedback. This is big step in the right direction. In a perfect world each deliverable would:</p> <ol style="list-style-type: none"> 1. Have clear and concise evaluation criteria. 2. Have FAQs when needed. 3. Data driven, with less focus on narratives, as narratives brings a significant amount of interpretation. 4. Template set at the beginning of the contract year and cannot change until the next year. This is important as a lot of our deliverable require significant system configurations. 5. Not be duplicative of other evaluation work, such as EQRO. 6. Lengthily/complex deliverables are spread out throughout the year. 7. If changes on a deliverable are going to be made, engage CCOs on the front end as this will alleviate a lot of the back-n-forth. 8. If a deliverable does not pass, require OHA and CCO staff to review the feedback together to ensure alignment and understanding. 9. Evaluations completed within one month of the submission date. <p>Feedback is taking way too long. If a deliverable cannot be reviewed by OHA staff within a month, that is a good indication that it is too much. We understand that CMS has increased their expectations on how OHA oversees CCOs. We welcome the opportunity to demonstrate the great work that we do, but sadly some of the deliverables and the process overshadows that work. For the most part, OHA staff have been great at making themselves available to provide technical assistance when needed. Again, we appreciate this opportunity and would love to partner with OHA on finding a healthy medium for everyone. "</p>
CCO	41	I appreciate timely feedback when we have questions. Communication is always good, thank you!
CCO	42	I think overall, we'd love to change the submission for both the handbook and NEMT guide to be in one place (either over email or through Sharepoint) rather than both.
CCO	43	Greater emphasis should be placed on streamlining deliverables. The decision to absorb the MEPP into the TQS serves as a great example. Many other elements of other work within the CCO realm have similar opportunities for integration/streamlining as they have such high quantities of overlap.

CCO	44	Receiving Ex. D earlier in the contract process, even if it is a draft, would help our process tremendously.
CCO	45	I appreciate the opportunity to provide feedback on how best to restructure the process for CCO deliverables. Our primary goal of this restructuring is to reduce the significant amount of time our organization and network of care providers must invest in their preparation and submission. Two of the most important ways we can do this are 1. Eliminating duplicative submissions by identifying opportunities for the same data to be used by different OHA departments for multiple purposes, and 2. Stabilizing the standards by which deliverables are evaluated so that CCOs can rely on a more predictable and replicable process for compiling and submitting the required data.
CCO	46	My introduction to the CCO Contract Deliverables process formally was in 2020 as all new NEMT rules and contract expectations were introduced. It has been a very challenging process to understand what is OHA's real intent and focus. I appreciate and understand the importance of compliance, oversight and monitoring, but often times it feels like there is a desire to create a "one-size" fits all approach and has taken years to advocate for specific ancillary areas that are overlooked and unsupported. There is a desire to address equity and justice in our health care system reform and transformation, but we need to acknowledge unintended impacts when we accelerate performance and contract expectations for those overlooked areas like NEMT or social health without pairing technical assistance, community engagement, subject matter expert input, and identifying opportunities for integration.... it can exacerbate the systemic issues rather than improve and fix them. The Contract deliverables process has been so overly administratively burdensome for both OHA and CCOs, it's been hard to see where we are actually making strides in improvements. The recent developments of support have been hopeful and promising, but the continued requirements for the deliverable processes related to the non-traditional areas (NEMT, social health/HRS, health equity, etc) creates arbitrary administrative burden to showcase arbitrary progress that doesn't look like it has longevity or realistically helpful information. As someone who was born and raised in Oregon, has lived and current family experiencing poverty, immigrant and single-parent upbringing - I have a deep and committed personal and professional investment to improving the lives of other Oregonians. My critiques are always focused on achieving the actual desired long-term system results and ensuring we have longevity in our solutions. My critiques are not shared without gratitude and acknowledgement of the dedicated state employees doing their best with good intentions.
CCO	47	I picked an arbitrary answer on number six due to the answers not being applicable in most cases. The issue with the deliverables is the volume and due dates. When there are many complex deliverables due at the same time it becomes exhausting. Give us a tough deliverable with a bunch of easier ones. Spread out the pain so it is not draining the staff. A great example of this is the number of Behavioral Health Directors that left the CCOs and mostly due to the number of deliverables with the complexity being unrelenting. As you can imagine, CCOs do not have as many staff as there are deliverables in numbers to spread out the intense nature of the requests. As an organization, we pride ourselves on being agile and really have our finger on the pulse of our community, the work, our mission and why we do what we do. The deliverables detract from that at times. When you look at the volume of reports, the number of people it takes to collaborate, the number of hours it takes to produce we have to ask ourselves if this is helping to improve the outcomes or what the value is when it is not readily shared. There are meaningful reports that go out and CCOs really want to hear the feedback so we can improve but then we get nothing for sometimes a year, which is not helping progress. Another area we can describe is that when the OHA changes the process every single year, we do not know the value of that change and a baseline is impossible to measure. When we have received feedback multiple times on a deliverable, and we ask for TA so we can be clear on what the OHA is looking for it feels as though we cannot get a clear answer or the staff is afraid to give us clear guidance like we might be cheating on a test. I understand we have asked for at least 90 days when a template changes, if the data being requested is NEW then 90 days will not be sufficient to capture a year's worth of information when we have focused on the previous guidance. Overall, I think we can be helpful to one another if we went into this as partners. If the OHA has specific information that they

		must report on, let's be sure that is communicated first. If it is information the OHA believes is valuable for oversight, let us partner in what may help you more. No one is trying to diminish the value of great reporting; however, it needs to be actionable information to bring value. If we are reporting just so the OHA has oversight, let's be thoughtful about what can help both of us improve our outcomes. It would also be helpful if the OHA had the same requirements on the FFS population so the entire population with coverage was measured equitably.
CCO	48	Appreciate care is being taken to consider time needed to accommodate a new rule change with operational ramifications.
CCO	49	In general, there are way too many deliverables. All of those deliverables take considerable staff time. My team alone is responsible for several, many of which are due the same day, and almost all of which require meaningful CAC input. This means that a solid quarter of the CAC year is fully devoted to OHA-required tasks rather than the spirit of what they're here for. And to hear that there may be yet more coming down the pike related to social health is frustrating, because it's not like our admin cap goes up to accommodate the work that generates.
CCO	50	1. Review of certain deliverables not complete in advance of next submission date (ie: Health Equity Report review not completed before release of instructions for the next report) 2. Consistency among all CCOs on deliverables (all CCOs should be submitting the same format) 3. Recommend noting which deliverables link information to each other (Health Equity, THW, CAC, CHIP Reports all have information that overlaps)
CCO	51	We have two services area and having to submit a separate email (I understand the need for separate deliverables) is unnecessary in my opinion. I was told it was for OHA's tracking purposes. We always sent both service areas in the same email, never one service area in one mail and then the other service area 3 days later. I would think the person doing the tracking would know Trillium has 2 service areas therefore, in most cases, there are 2 deliverables submitted with the one email. On a positive note, I really find Cheryl Henning pleasant to work with, always responsive to my questions, and if she does not know the answer, she lets me know she has forwarded my question to somebody who can provide the answer.
CCO	52	The Contract Deliverables process is easy to follow, but there are still duplicates that should be addressed.
CCO	53	Please evaluate the Q1 deliverables to see if anything can be shifted to another timeframe, as there are way too many deliverables at that time.

CCOs: Do you have comments about any other deliverables?

CCO Responses: 38 out of 139 (*Comments are verbatim*)

TYPE	#	COMMENT
CCO	1	The HIT roadmap data submission is the most user friendly, and useful element of all of the OHA deliverables.
CCO	2	PIPs. I believe a bi-annual submission of the pips would really help. I would also like to know how OHA is using the information we submit for the PIPs. Do you even read them? How are they shared with the public? Etc.
CCO	3	I am hoping that OHA has meetings to get feedback from each CCO before changing templates. Exhibit I new template, I was not aware that there were meetings to provide feedback. In the past we use to have one a quarter meeting with all CCOs to discuss the changes.

CCO	4	There feels like duplication among many of the reports with information that is being requested. Overall, more lead time is needed for releasing templates as because we begin working on completion of them more than 3 months in advance, especially for staff who manage multiple deliverables with the same due dates.
CCO	5	for new staff, an OHA meet and greet with deliverable expectations would be very helpful.
CCO	6	CCO's should be accountable for their performance, but it's not clear how some of the reports are tied to that, and often it's not clear what (or if) OHA will use the reports.
CCO	7	Exhibit I reporting changes. Some of the elements removed from the excel spreadsheets fed data into the question on the grievance system report (word document). I wish those two formats would have been compared before removal of that data from spreadsheets. Now, we have to keep our own data going forward, and add it back to the templates, to populate some of the fields in the word document.
CCO	8	No
CCO	9	When coupling contract deliverables with ad hoc deliverables, staff spend more time in developing reporting than in the actual functional delivery of services. This has significant administrative impacts to the staffing numbers that are required to support development of reporting compared to other system transformation and service delivery efforts.
CCO	10	N/A - please note, my comments apply to Health Share, Jackson Care Connect, and Columbia Pacific CCO.
CCO	11	N/a
CCO	12	None.
CCO	13	Can OHA provide all CCOs with an update in which the remaining deliverables will be reviewed and discussed? Not all remaining deliverables fall into the ad hoc or EQR space.
CCO	14	Please see comments provided on the specific deliverables.
CCO	15	No
CCO	16	There are many deliverables due in the first quarter of the year which creates a lot of administrative burden and stress to our staff. This includes EQR as well as OHA deliverables. We would like to see OHA distribute deliverable deadlines throughout the year more evenly and provide consistency and advanced notice with reporting templates. We would like to see templates released at least 90 days before the first reporting *period timeframe, so that we have adequate time to put the required reporting in place. We would like the templates to remain consistent year over year as much as possible.
CCO	17	We have experienced inconsistent feedback in OHA yearly reviews versus annual compliance monitoring reviews.
CCO	18	The grievance and appeal deliverables review process is especially time consuming and requires a lot of administrative back and forth and waiting time. This process could be streamlined. Reviewer feedback from OHA is uneven. Sections of P&P that met the same criteria last year might not meet this year. Most of the revisions required do not impact the actual operations of the P&P and are just wording changes to more closely match the OAR or contract language. Many times reviewer comments require duplicate information be included across many P&Ps. For example, review comments have required that we repeat sections of our Member Information P&P in the Grievance System P&P rather than refer to another P&P. We tried submitting the relevant P&P, but were

		<p>required to repeat the information in both documents rather than have it once in the P&P that makes the most operational sense. This practice makes all the P&P documents reviewed by OHA repetitive and more administratively difficult to manage for the CCO. The Grievance and Appeal P&P is submitted to OHA 4 or 5 times per year. Once as a stand-alone deliverable, and then several more times as required evidence or attachments to other deliverables. The evaluation criteria documents in excel are difficult to work with and very time consuming to complete, especially when the review elements are rearranged in the document. The Annual PCPCH enrollment report is asking for data that is already submitted in the 4th quarter DSN Capacity report. Guidance for the DHS MOU Activities report and MOU updates is insufficient and technical assistance was not helpful in resolving our questions. FWA deliverables guidance is insufficient to answer questions. THW deliverables review criteria as written do not match up with how those deliverables are currently being reviewed. The guidance for the Comprehensive BH Plan did not seem to match up with how the evaluation was conducted. Much of the information is repetitive from other deliverables such as the CHA and CHIP. The information requested for the MH Parity evaluation is very similar to much of the information provided through the G&A quarterly logs and other claims/encounter data submissions. The rolling 12 month time frame for the quarterly language access and interpreter services report is repetitive. Feedback from the Health Equity Plan Update and training plan is too far removed from the submission to be useful in adjusting course before the next submission is due. We submitted in August 2021 and received feedback in April 2022. We submitted in June 2022 and have not yet received feedback as of April 2023. The CAC Member Demographic Report requires some of the same information as the CHA. We have a number of pages in the annual report that are simply copied from the current CHA.</p>
CCO	19	<p>Many of the narrative deliverables ask us the same questions over and over and slightly different ways. This means that we are having to inform OHA staff of our structure, business model, payment models, equity and quality work multiple times but are never able to cut and paste from other reports. It puts the burden of educating multiple OHA departments in multiple ways on teh CCO, rather than having OHA compile information about each CCO that is shared across its own staff internally.</p>
CCO	20	<p>Although an attempt was made to streamline the financial reporting, it is still duplicative between the NAIC reports and the Exhibit L. All the NAIC reports have done is add increased administrative cost and burden to CCO's.</p>
CCO	21	<p>Deliverable schedule does not take into account HSAG activities and other audits; also does not include dates for follow up resubmissions.</p>
CCO	22	<p>If you are allowing the CCO to attest that no changes have been made, then please accept that attestation and don't ask for supporting information for the attestation. If you want the deliverable, then don't offer the attestation as an option.</p>
CCO	23	<p>This has more to do with audits, resubmissions and other 'ad hoc' reviews. The same personnel, documents and other resources are used with these areas in addition to the 'deliverables' section of this survey. The question that asked about the number of hours spent on individual deliverables. 15+ hours does not begin to reflect the number of human resource hours; there were several that I have tracked 160+ hours on just one deliverable. Please, please attempt to do a 'sweep' of these areas. Thank you for taking the feedback.</p>
CCO	24	<p>You don't have all the deliverables on this list. It's missing: HSAG deliverables: EQR ISCT DSN Mental Health Parity Compliance Encounter data Validation ----- Many of the financial audits PIPs (Quarterly and HSAG) ----- Multiple new programmatic changes which create one time deliverables</p>
CCO	25	<p>Some deliverables need to be added to the list you provided. HSAG Financial Audits Resubmissions</p>

CCO	26	There is duplication of information submitted to OHA/HSAG over a year that includes the HSAG EQR/CMR audits, ISCAT, Parity Audit, the quality PIP submission quarterly has an annual submission for the Statewide PIP. The timing of the deliverables overlap on other competing priorities such as with the HSAG audit documentation submission.
CCO	27	There are too many deliverables and deliverable due dates. Accountability is important but we are spending valuable staff resource to complete what feels like an avalanche of never ending reports.
CCO	28	Too much overlap between deliverables and the HSAG audits.
CCO	29	it would be helpful if deliverables could have more flexibility in format being submitted. CCO's
CCO	30	No
CCO	31	Many of the deliverables have the same due dates and this can be difficult is staff working on competing deadlines. For example, there are 40 deliverables in January, many of them involving BH. 3 large deliverables are due 3/15, TQS, LTSS, and the HIT. These are valuable submissions but if possible, reducing the amount of submissions due on the same date would be helpful for workflow.
CCO	32	Deliverables which allow an attestation should not have to be submitted unless they have changed, regardless of how many times an attestation was submitted. Having a secure online portal for CCOs to submit deliverables to OHA would be tremendously helpful as many deliverables are large and require multiple emails. It would also remove the need to use the secure email system.
CCO	33	No, I would just ask that we combine like deliverables where possible and ensure the deliverables have a purpose.
CCO	34	Contract is prescriptive and makes opportunities for creativity and innovation harder to introduce
CCO	35	The Health Equity Plan and CHP could be far more connected and less repetitive than the current state.
CCO	36	Regarding the NOABD files from the Exhibit I samples, it would be nice if we could submit those through an SFTP site. Those files are quite large and have to be broken out into many emails. In March I had to submit 25 emails. It takes one to two hours to zip the files together, create 25 emails and double check that email 3 of 17 has file 3 of 17 attached, it says 3 of 17 in the subject line and it says 3 of 17 in the body of the email.
CCO	37	Limit the amount of duplicates. There are still too many duplicates which makes it tiresome.
CCO	38	In regard to the HAKR metric I feel like the attestation survey should be sufficient and we should not need to submit the asset map and action plan as supporting evidence unless OHA has questions or would like to audit the CCO

COMMENTS FROM OHA STAFF
OHA: What are the barriers or challenges you experience when evaluating deliverable submissions from CCOs?

OHA Responses: 43 out of 51 (*Comments are verbatim*)

TYPE	#	COMMENT
OHA	1	Too many deliverables to review at one time.
OHA	2	Lack of organize tools to utilize for evaluation. we have developed our own evaluation tool which is only know to us and no one in other units knows. Some of the Deliverables live in other places that we sometime don't have firsthand information relies on other's feedback. Lack of Comprehensive and collective Policy work together with other units.
OHA	3	Need more staff in our unit's Transportation team (under-staffed) for review and monitoring needs, current staff with many competing priorities; Large volume of individual documents to track with various individual submission and re-submission review timelines to keep track of; What to do when a CCO doesn't submit on time, who handles; Issues with some files, when the submitted files won't open or download from SharePoint or get mis-filed. In SharePoint the difference/when to use between 'approved' vs. 'completed' to signify on a submission is unclear.
OHA	4	Time. Some units do not collaborate with others when developing tools and thus they are not as good as they could be.
OHA	5	I'm new to this position and have not participated in the evaluation process yet.
OHA	6	Currently, the work that we do has been in place for quite some time and hasn't had any changes so we feel we are in a good place with review.
OHA	7	I am new to my role and have not yet been involved with the evaluation process.
OHA	8	Some forget to submit requiring email requests.
OHA	9	Some of the documents were in multiple places making it confusing to distinguish which belonged where. I also saw correspondence that noted an attachment. Unfortunately, none of the attachments were present. I then had to reach out to the CCO to get the attachments.
OHA	10	Writting up individualized feedback to each CCO takes a large amount of time. Some review and validation results may be automated to speed up the feedback write-ups.
OHA	11	CCOs do not always clearly indicate where within the submission the element can be found. This can be challenging as some submissions are quite lengthy. When reviewing policies and procedures it can be challenging when the submission is not clearly identified for example when reviewing the G & A policies and procedures it is helpful when the CCO submission has a policy for grievances and a separate policy for appeals submitted separately. Sometimes these are submitted as one large file and you have to scroll through the whole document to find the right policy and procedure.
OHA	12	Missing key deliverables such as required information, how to determine cost effectiveness, information not included that is in the contract. Having to send back for resubmission.
OHA	13	Missing/incorrect documents; missing/incorrect citations

OHA	14	Evaluating CCO deliverables has been a straightforward process for OPAR - Health Insurance Group. We have a fairly simple deliverable.
OHA	15	N/A
OHA	16	I'm still fairly new to this, so I want to make sure that everything is working smoothly. The VBP deliverables (Exhibit H) come through the VBP mailbox, but still need to be tracked through the Deliverable Tracking System. I'll receive our main deliverables on May 5th, and may have more feedback at that time.
OHA	17	OAFA has a process that is used each quarter to examine all of our required deliverables. No barriers are currently in place, and we strive to review and provide timely feedback and inquiries from our CCO contacts.
OHA	18	I don't currently evaluate any CCO deliverables.
OHA	19	None.
OHA	20	Sometimes I feel like there might be some misinterpretation of the eval element. CCOs not consistent with document submission and over submit or under submit documents. SMEs reviewing deliverables not consistent with how deliverables are being reviewed. Guidance sometimes not clear of what is being asked. The "why" the deliverable is being requested and what it is used for is not clear at times.
OHA	21	Too much back and forth with CCOs, file size limitations, lack of standardization across the board. If there were better standardization it would be much easier to automate the deliverable evaluation. So much time is being spent on improving data quality that it leaves little time to analyze the data before moving on to the next submission. The quick turnaround between submission and evaluation leaves little time for improvement of internal processes.
OHA	22	Time, Capacity
OHA	23	Most of the deliverables I'm alerted to are changes in preferred drug lists or prior authorization criteria. I do not review these submissions. Instead, I rely on the archive of these submissions for consultation when an issue arises. It would be very helpful if these could be archived online in a way that is easier for me, and the public, to access and search.
OHA	24	Having enough time to evaluate deliverables and get feedback to CCOs in a timely manner.
OHA	25	The review process is intensive and the timelines for completing reviews and turning feedback around to the CCOs often feels condensed due to the complexity of reviews and competing workstreams and projects.
OHA	26	I have experienced no barriers in the work that I perform.
OHA	27	I evaluate CCOs related to PBM readiness on an as needed basis, confirm that they submit their yearly market checks, and evaluate their pay-for-performance metrics quarterly. I have not experienced any barriers for completing this work.
OHA	28	Incomplete/missing information.
OHA	29	Consistency in CCO compliance with template (guidance) requirements for deliverables
OHA	30	Consistency in CCO responses to deliverables templates. Submissions to not always adhere to reporting template.

OHA	31	These are challenges associated with the full process of managing deliverable reviews. 1) Ensuring evaluation criteria is aligned with other deliverable criteria managed by other teams or divisions (for example, required CCO policies across varying content areas). 2) Capacity to manage review process, review deliverable, and complete all the associated administrative tasks with zero administrative support and lack of dedicated FTE across all reviewers (as in one may have partial FTE dedicated, but most do not). 3) Guidance in drafting and improving evaluation criteria over time. Specifically, guidance on improving language to meet deliverable intent while using plain language.
OHA	32	I am new to this process, I do not have feedback at this time.
OHA	33	These are challenges associated with the full process of managing deliverable reviews. 1) Ensuring evaluation criteria is aligned with other deliverable criteria managed by other teams or divisions (for example, required CCO policies across varying content areas). 2) Capacity to manage review process, review deliverable, and complete all the associated administrative tasks with zero administrative support and lack of dedicated FTE across all reviewers (as in one may have partial FTE dedicated, but most do not). 3) Guidance in drafting and improving evaluation criteria over time. Specifically, guidance on improving language to meet deliverable intent while using plain language.
OHA	34	Subcontracting entities referring to their subcontractors as being partially responsible without including the materials from the subcontractors.
OHA	35	Time to process results --need to wait for some support from HPA staff, block time to work on detail reviews. As long as it is regular, yearly same time it does become part of schedule. Unrealistic overlap of due dates for more than one p review makes it not possible to meet 60 day response for 2nd deliverable.
OHA	36	There is minimal buy-in from CCOs around the health equity plan. Or at least the CCO CEOs seem to be under the impression that the existence of the plan is to burden the CCO further. I get a different picture from the people working in equity and community engagement, who are glad we have the plan, so their work can be elevated and resources made available. Another barrier was that E and I needed to be resourced to work on the HEPs. With only one person doing other jobs and the HEPs, sometimes it was almost unmanageable. We solved this issue in the last five months when someone else came to work on the HEP. With two people, we can now do everything planned since 2020.
OHA	37	I have run into several situations where CCOs do not turn in the correct information for the deliverable and it delays the process. For example, they may submit incorrect documentation, outdated documentation, or the information that they provide is unclear and additional information is needed. Another challenge is that there are sometimes differences in interpretation of requirements or policy, which can make the deliverable review process more drawn out.
OHA	38	Inconsistencies with reviewers, assuring we all approach each element the same and prepare the evaluation criteria the same (name and date of reviewer) CCO Name at the top.
OHA	39	Data quality. Invalid inputs, and lack of data self-cleaning from the CCOs make it difficult to perform our analysis in a accurate and efficient manner.
OHA	40	Lack of clarity about where completed evaluations should be saved (for CCO P&Ps, CBHP progress reports, etc.). The emailed links take the user to a folder that includes the deliverables for all CCOs, rather than directly to the CCO whose deliverable has been submitted.
OHA	41	This is a new report and I have not had to review these previously. I assume that finding time to review all the reports may be difficult, especially if there are follow up questions that need to be addressed and tracked.

OHA	42	Biggest obstacle is just to get them to even abide by ACT Program rules/contract in general (all of it; data, reporting, referrals etc). I often get the run-around on who to discuss the obstacles/non-compliance with and it becomes a "hot potato" game between CCO and programs. I am comfortable with enforcing rules on programs, but the CCO's are very difficult to navigate. I have included Liaison, IA team etc and nothing ever feels like it is fully addressed. Health Share/Care Oregon dynamics are extremely confusing. These two entities are contractors/subcontractors for one another, and their roles flip flop constantly. It feels like a huge loophole that allows zero accountability.
OHA	43	2022 was my first time evaluating deliverables. I think a structured eval criteria document should be made available. Document size is often too large and requires different emails which makes tracking difficult. Submission of accessories/supplemental items but be indicated in communication to CCOs as to whether it is required, not required or optional and should be clearly marked if deliverables contain supplemental documents

OHA: Do you have additional comments, suggestions or questions about the Contract Deliverables process?

OHA Responses: 12 out of 51 (*Comments are verbatim*)

TYPE	#	COMMENT
OHA	1	Not at this time; however with large NEMT Project activities and recommendations may develop in the next year or so, including potentially for these NEMT related CCO deliverables. Thank you.
OHA	2	I apologize as my answers are likely not applicable as my team doesn't evaluate any of the deliverables listed. Sorry!!
OHA	3	I appreciate how hard Cheryl Henning and everyone on that team works to help the business units manage this process. Cheryl, in particular, is very timely with responses and has provided us with valuable guidance over the years. Thank you!
OHA	4	These deliverables are key to confirm that the financial information being reported is complete and accurate. In terms of receiving information to measure financial accuracy against. "tell us your plan, then confirm you followed your plan"
OHA	5	None - thank you for the survey, the reminder to complete it, and everything else you all do!
OHA	6	The OHA deliverables process would be improved by HSD providing a clear pathway from deliverable submission to sanction/correction by OHA. A never ending cycle of 'TA' is not compliant with basic program integrity principles or with OHA's obligations under CFR. CCOs continue to have the same findings year after year - however OHA imposes no penalty. Deliverables are late, deliverables are incomplete, deliverables are issued findings yet not corrected by CCOs year after year. Recommend HSD continue to develop its deliverables review process to include a full and complete process for review that includes imposing sanction/fine for CCOs who fail to come into compliance with requirements of the contract.
OHA	7	Lots of these changes already in the works! Time and resources are key.
OHA	8	No, thanks.

OHA	9	I appreciate of the QA team's work to date and the continued support for staff doing CCO deliverables reviews. I wish all of this work could have started during the first five years of CCO contracts.
OHA	10	HRS is defined more under the 1115 OHP waiver requirements than CFR, OAR, or elsewhere - it didn't seem like that was an allowable category in this survey, but that's where the program comes from.
OHA	11	It would be great to have a training opportunity for Contract Administrators/Policy Analysts so that we can better communicate with CCO's and our programs. I spend a lot of time in circular discussions and don't get a lot accomplished due to ignorance of CCO structure. My programs also often have frequent turn-over in staff so they also get just as frustrated, so it would be great for me to have some basic knowledge so I can support programs in navigating the CCO infrastructure.
OHA	12	Send reminders and deadlines to departments to update deliverable related communication materials. And also share draft documents of guidance and eval criteria documents including instructions to departments/programs

IN-DEPTH FEEDBACK ABOUT EACH DELIVERABLE

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Feedback key:

CCO

OHA

Deliverable 1: Organizational chart or interrelationships list [Ex. B, Part 1, Sec. 1, Para. D]**How many CCO staff members chose this deliverable? 20****Q5 Staff Involvement** – Responses: 19 out of 20

I am lead for this deliverable	Requires help from other staff	Less than 5 total staff hours required	5 – 10 total staff hours required	10-15 total staff hours required	15+ total staff hours required
9 (47.37% of Q5 responses)	10 (52.63% of Q5 responses)	9 (47.37% of Q5 responses)	5 (26.32% of Q5 responses)	1 (5.26% of Q5 responses)	1 (5.26% of Q5 responses)

Q6 Issues – Responses: 16 out of 20

We DO NOT use the information for internal operations	The submission does not change year over year	Another deliverable asks for same info	Deliverable has inconvenient due date	Too many submissions required per year
7 (43.75% of Q6 responses)	7 (43.75% of Q6 responses)	9 (56.25% of Q6 responses)	3 (18.75% of Q6 responses)	1 (6.25% of Q6 responses)

Q8 Satisfaction 1 to 5 stars: 1.8 stars

Responses: 4 out of 20

Q9 How should OHA change this deliverable?

Responses: 6 out of 20

- Change from scheduled to ad hoc / only when necessary: 3
- Combine with another deliverable: 3
 - Reduce number of duplicate reporting for this information and make it attestation based to reflect changes
 - Corporate Governance Annual Disclosure and/or NAIC Form B
 - Only ask for it once, then an attestation where it currently asks for it other places: "Current year's org chart has been submitted"

Q10: What other feedback do you have about improving this deliverable?

- Responses: 2 out of 20
- YCCO seeks to understand the purpose and why this is requested multiple times through different requirements
- A lot of information in this deliverable is repetitive of other deliverables throughout the year. Much of the organizational structure does not change from year to year. Changes in ownership have other requirements to report. There is no guidance on what is required for this other than the contract language. It is not clear what use this deliverable is to OHA and whether or not what we provide is meeting expectations or now.

Deliverable 1: Continued from previous page

How many OHA staff chose this deliverable? 2

Q107 Primary purpose for deliverable submission to OHA – Responses: 2 out of 2

Document compliance	Share plans / future activities	Report performance for monitoring	Progress report for projects / programs	Inclusion in state / federal reporting	Identify designee / contacts
0 (0% of Q107 responses)	1 (50% of Q107 responses)	1 (50% of Q107 responses)	0 (0% of Q107 responses)	0 (0% of Q107 responses)	0 (0% of Q107 responses)

Q108 How submission information is used by OHA – Responses: 2 out of 2

Acknowledge receipt only	Evaluate / return results (Includes attestations)	Internal reporting	External reporting
1 (50% of Q108 responses)	2 (100% of Q108 responses)	1 (50% of Q108 responses)	0 (0% of Q108 responses)

Q109 Awareness of other OHA staff or units who use information from same deliverable ?

Responses: 1 out of 2

- Yes: 1
- No: 0

Q110 Awareness of other Contract deliverables that ask for the same or similar information?

Responses: 1 out of 2

- Yes: 1
- No: 0

Q111 OHA Staff Involvement – Responses: 1 out of 2

Please tell us about how much time it takes to review the deliverable(s) you evaluate or coordinate.

I am lead for this deliverable	Total staff time required per CCO				
	< 30 minutes	0.5-2 hours	3-5 hours	6-10 hours	11+ hours
0 (0% of Q111 responses)	0 (0% of Q111 responses)	1 (100% of Q111 responses)	0 (0% of Q111 responses)	0 (0% of Q111 responses)	0 (0% of Q111 responses)

Deliverable 2: Perinatal care coordination and Family Connects Oregon contact [Ex. B, Part 2, Sec. 12, Para. e (1)]

How many CCO staff members chose this deliverable? 11

Q5 CCO Staff Involvement – Responses: 10 out of 11

I am lead for this deliverable	Requires help from other staff	Less than 5 total staff hours required	5 – 10 total staff hours required	10-15 total staff hours required	15+ total staff hours required
5 (50% of Q5 responses)	6 (60% of Q5 responses)	3 (30% of Q5 responses)	3 (30% of Q5 responses)	3 (30% of Q5 responses)	0 (0% of Q5 responses)

Q6 Issues – Responses: 7 out of 11

We DO NOT use the information for internal operations	The submission does not change year over year	Another deliverable asks for same info	Deliverable has inconvenient due date	Too many submissions required per year
6 (85.71% of Q6 responses)	2 (28.57% of Q6 responses)	0 (0% of Q6 responses)	0 (0% of Q6 responses)	1 (14.29% of Q6 responses)

Q8 Satisfaction 1 to 5 stars: 5 stars

Responses: 1 out of 11

Q9 How should OHA change this deliverable?

Responses: 2 out of 11

- Don't change the deliverable: 1
- Combine with another deliverable: 1
 - I'd like to see all of the "contact" deliverables combined into one annual request for contacts for various programs/topics/meetings/reports

Q10: What other feedback do you have about improving this deliverable?

- Responses: 0 out of 11

Deliverable 2: Continued from previous page

How many OHA staff chose this deliverable? 1

Q107 Primary purpose for deliverable submission to OHA – Responses: 1 out of 1

Document compliance	Share plans / future activities	Report performance for monitoring	Progress report for projects / programs	Inclusion in state / federal reporting	Identify designee / contacts
1 (100% of Q107 responses)	0 (0% of Q107 responses)	0 (0% of Q107 responses)	0 (0% of Q107 responses)	0 (0% of Q107 responses)	0 (0% of Q107 responses)

Q108 How submission information is used by OHA – Responses: 1 out of 1

Acknowledge receipt only	Evaluate / return results (Includes attestations)	Internal reporting	External reporting
0 (0% of Q108 responses)	1 (100% of Q108 responses)	1 (100% of Q108 responses)	1 (100% of Q108 responses)

Q109 Awareness of other OHA staff or units who use information from same deliverable ?

Responses: 1 out of 1

- Yes: 0
- No: 1

Q110 Awareness of other Contract deliverables that ask for the same or similar information?

Responses: 1 out of 1

- Yes: 0
- No: 1

Q111 OHA Staff Involvement – Responses: 1 out of 1

Please tell us about how much time it takes to review the deliverable(s) you evaluate or coordinate.

I am lead for this deliverable	Total staff time required per CCO				
	< 30 minutes	0.5-2 hours	3-5 hours	6-10 hours	11+ hours
0 (0% of Q111 responses)	0 (0% of Q111 responses)	0 (0% of Q111 responses)	1 (100% of Q111 responses)	0 (0% of Q111 responses)	0 (0% of Q111 responses)

Deliverable 3: Family Connects Oregon Community Alignment Report [Ex. B, Part 2, Sec. 12, Para. e (2)]

How many CCO staff members chose this deliverable? 12

Q5 Staff Involvement – Responses: 11 out of 12

I am lead for this deliverable	Requires help from other staff	Less than 5 total staff hours required	5 – 10 total staff hours required	10-15 total staff hours required	15+ total staff hours required
5 (45.45% of Q5 responses)	6 (54.55% of Q5 responses)	4 (36.36% of Q5 responses)	4 (36.36% of Q5 responses)	2 (18.18% of Q5 responses)	0 (0% of Q5 responses)

Q6 Issues – Responses: 8 out of 12

We DO NOT use the information for internal operations	The submission does not change year over year	Another deliverable asks for same info	Deliverable has inconvenient due date	Too many submissions required per year
7 (87.50% of Q6 responses)	4 (50% of Q6 responses)	0 (0% of Q6 responses)	0 (0% of Q6 responses)	3 (37.50% of Q6 responses)

Q8 Satisfaction 1 to 5 stars: 4 stars

Responses: 2 out of 12

Q9 How should OHA change this deliverable?

Responses: 3 out of 12

- Change from scheduled to ad hoc / only when necessary: 2
- Remove deliverable completely: 1

Q10: What other feedback do you have about improving this deliverable?

- Responses: 2 out of 12
 - We do not do anything with this information which I compile from looking back at calendars for meeting dates and meeting with Washington county for their insights. Curious what OHA does with this information. Maybe just change to once a year - report for the whole year?? Or only when something significant changes??
 - This program is not operating in our service area and has no schedule for when that might change, but we have 3 required deliverables to complete and submit to OHA each year about it. That's administrative work for us and OHA that adds no value to members or the health care system.

Deliverable 3: Continued from previous page

How many OHA staff chose this deliverable? 1

Q107 Primary purpose for deliverable submission to OHA – Responses: 1 out of 1

Document compliance	Share plans / future activities	Report performance for monitoring	Progress report for projects / programs	Inclusion in state / federal reporting	Identify designee / contacts
1 (100% of Q107 responses)	0 (0% of Q107 responses)	0 (0% of Q107 responses)	0 (0% of Q107 responses)	0 (0% of Q107 responses)	0 (0% of Q107 responses)

Q108 How submission information is used by OHA – Responses: 1 out of 1

Acknowledge receipt only	Evaluate / return results (Includes attestations)	Internal reporting	External reporting
0 (0% of Q108 responses)	1 (100% of Q108 responses)	1 (100% of Q108 responses)	1 (100% of Q108 responses)

Q109 Awareness of other OHA staff or units who use information from same deliverable ?

Responses: 1 out of 1

- Yes: 0
- No: 1

Q110 Awareness of other Contract deliverables that ask for the same or similar information?

Responses: 1 out of 1

- Yes: 0
- No: 1

Q111 OHA Staff Involvement – Responses: 1 out of 1

Please tell us about how much time it takes to review the deliverable(s) you evaluate or coordinate.

I am lead for this deliverable	Total staff time required per CCO				
	< 30 minutes	0.5-2 hours	3-5 hours	6-10 hours	11+ hours
0 (0% of Q111 responses)	0 (0% of Q111 responses)	0 (0% of Q111 responses)	1 (100% of Q111 responses)	0 (0% of Q111 responses)	0 (0% of Q111 responses)

Deliverable 4: Moral objections policy [Ex. B, Part 2, Sec. 3, Para. c (1)]

How many CCO staff members chose this deliverable? 10

Q5 Staff Involvement – Responses: 9 out of 10

I am lead for this deliverable	Requires help from other staff	Less than 5 total staff hours required	5 – 10 total staff hours required	10-15 total staff hours required	15+ total staff hours required
5 (55.56% of Q5 responses)	4 (44.44% of Q5 responses)	8 (88.89% of Q5 responses)	0 (0% of Q5 responses)	1 (11.11% of Q5 responses)	0 (0% of Q5 responses)

Q6 Issues – Responses: 7 out of 10

We DO NOT use the information for internal operations	The submission does not change year over year	Another deliverable asks for same info	Deliverable has inconvenient due date	Too many submissions required per year
2 (28.57% of Q6 responses)	7 (100% of Q6 responses)	0 (0% of Q6 responses)	0 (0% of Q6 responses)	0 (0% of Q6 responses)

Q8 Satisfaction 1 to 5 stars: 3.5 stars

Responses: 2 out of 10

Q9 How should OHA change this deliverable?

Responses: 3 out of 10

- Change from scheduled to ad hoc / only when necessary: 2
- Remove deliverable completely: 1

Q10: What other feedback do you have about improving this deliverable?

- Responses: 2 out of 10
- We do not have a moral objections policy, but we have to track this due date and make sure we notify OHA each year that we still do not have one because we do not need one.

Deliverable 5: Non-Emergent Medical Transportation (NEMT) policies and procedures [Ex. B, Part 2, Sec. 5, Para. C]

How many CCO staff members chose this deliverable? 15

Q5 Staff Involvement – Responses: 13 out of 15

I am lead for this deliverable	Requires help from other staff	Less than 5 total staff hours required	5 – 10 total staff hours required	10-15 total staff hours required	15+ total staff hours required
6 (46.15% of Q5 responses)	9 (69.23% of Q5 responses)	0 (0% of Q5 responses)	2 (15.38% of Q5 responses)	5 (38.46% of Q5 responses)	6 (46.15% of Q5 responses)

Q6 Issues – Responses: 8 out of 15

We DO NOT use the information for internal operations	The submission does not change year over year	Another deliverable asks for same info	Deliverable has inconvenient due date	Too many submissions required per year
1 (12.5% of Q6 responses)	5 (62.50% of Q6 responses)	3 (37.50% of Q6 responses)	2 (25% of Q6 responses)	3 (37.50% of Q6 responses)

Q8 Satisfaction 1 to 5 stars: 1.5 stars

Responses: 3 out of 15

Q9 How should OHA change this deliverable?

Responses: 4 out of 15

- Change the format: 2
- Remove the deliverable: 1
- Attestation only: 1

Q10: What other feedback do you have about improving this deliverable?

- Responses: 3 out of 15
 - Over time, this deliverable has morphed from a simple check of whether policies contain the required elements into a more comprehensive audit of not only policies and procedures, but also evidence demonstrating that policies and procedures are followed. If OHA wishes to audit CCOs on NEMT operations, that should be conducted separately from the P&P submission.
 - Once policies are approved by OHA with no additional evaluation findings, attestation only would suffice.
 - OHA's method of evaluating P&P documents is cumbersome, time consuming, and of questionable value to operations. Completing the evaluation criteria document takes a great deal of time. I can only imagine it also takes a great deal of time for the OHA reviewers to do the same. Then the revision cycle is often confusing and drawn out over months. There are many repetitive elements in the NEMT P&P evaluation criteria. Reviewer feedback from OHA is uneven. Sections of P&P that met the same criteria last year might not meet this year. Most of the revisions required do not impact the actual operations of the P&P and are just wording changes to more closely match the OAR or contract language. Many times reviewer comments are requiring duplicate information be included across many P&Ps. This practice makes all the P&P documents reviewed by OHA repetitive and more administratively difficult to manage for the CCO. For the NEMT P&P evaluation in 2022 we were also required to submit our Grievance and Appeal P&P, the NEMT Call Center Script, the HIPAA Manual, and the Record Retention P&P. Many of the NEMT P&P evaluation criteria

responses got off track after several resubmissions and the review comments were asking for information that had already passed earlier review cycles for different elements.

How many OHA staff chose this deliverable? 4

Q107 Primary purpose for deliverable submission to OHA – Responses: 3 out of 4

Document compliance	Share plans / future activities	Report performance for monitoring	Progress report for projects / programs	Inclusion in state / federal reporting	Identify designee / contacts
2 (66.67% of Q107 responses)	0 (0% of Q107 responses)	0 (0% of Q107 responses)	0 (0% of Q107 responses)	0 (0% of Q107 responses)	1 (33.33% of Q107 responses)

Q108 How submission information is used by OHA – Responses: 3 out of 4

Acknowledge receipt only	Evaluate / return results (Includes attestations)	Internal reporting	External reporting
1 (33.33% of Q108 responses)	2 (66.67% of Q108 responses)	1 (33.33% of Q108 responses)	0 (0% of Q108 responses)

Q109 Awareness of other OHA staff or units who use information from same deliverable ?

Responses: 2 out of 4

- Yes: 1
- No: 01

Q110 Awareness of other Contract deliverables that ask for the same or similar information?

Responses: 2 out of 4

- Yes: 0
- No: 2

Q111 OHA Staff Involvement – Responses: 3 out of 4

Please tell us about how much time it takes to review the deliverable(s) you evaluate or coordinate.

I am lead for this deliverable	Total staff time required per CCO				
	< 30 minutes	0.5-2 hours	3-5 hours	6-10 hours	11+ hours
1 (33.33% of Q111 responses)	0 (0% of Q111 responses)	0 (0% of Q111 responses)	1 (33.33% of Q111 responses)	0 (0% of Q111 responses)	1 (33.33% of Q111 responses)

Deliverable 6: NEMT Rider Guide [Ex. B, Part 2, Sec. 5, Para. d (1)]

How many CCO staff members chose this deliverable? 16

Q5 Staff Involvement – Responses: 15 out of 16

I am lead for this deliverable	Requires help from other staff	Less than 5 total staff hours required	5 – 10 total staff hours required	10-15 total staff hours required	15+ total staff hours required
6 (40% of Q5 responses)	11 (73.33% of Q5 responses)	1 (6.67% of Q5 responses)	5 (33.33% of Q5 responses)	4 (26.67% of Q5 responses)	4 (26.67% of Q5 responses)

Q6 Issues – Responses: 8 out of 16

We DO NOT use the information for internal operations	The submission does not change year over year	Another deliverable asks for same info	Deliverable has inconvenient due date	Too many submissions required per year
0 (0% of Q6 responses)	5 (62.50% of Q6 responses)	4 (50% of Q6 responses)	1 (12.50% of Q6 responses)	3 (37.50% of Q6 responses)

Q8 Satisfaction 1 to 5 stars: 1.5 stars

Responses: 2 out of 16

Q9 How should OHA change this deliverable?

Responses: 2 out of 16

- Change the format: 1
- None of the above: 1

Q10: What other feedback do you have about improving this deliverable?

- Responses: 2 out of 16
 - This deliverable should have model language like the model member handbook.
 - Transportation services should and do follow the corresponding OHP covered service benefits and authorization requirements in order to support appropriate and complimentary NEMT services. This has definitely been revealed over the last 3 years, how differently CCOs are managing NEMT. Member handbooks and Riders Guides are not aligned from a member/human-centered experience, or ensuring they complement each other as standalone guide options. The Riders Guide in the first 2 years of development, was unclear how much and what was needed to explain the benefit. It is purely the transference of the policy requirements at a 6th grade reading level. It was very challenging to understand the conflicting OHA reviewers' opinions on what content should be captured and what is already potentially in the Member handbooks. The Riders Guide, or NEMT member materials does not require any real-life scenarios and details that are more helpful to a consumer and user. The framework of the guide was based on rule and contract language, not usability and ease of access to the consumer. It would be more beneficial to achieve both goals, by informing a consumer how to actually use it and what is allowed/not allowed and their rights and responsibilities. Additionally, the lack of CCO's ability to better and accurately customize content due to the limitations of the service areas is also challenging and not made possible under current requirements. People who live in extreme rural conditions or hard to find via GPS enabled mapping systems, inherently will access or utilize transportation resources differently than those who live in small and large urban areas with more transportation resources. Additionally, there are areas of content that CCOs are required to document and explain that are not feasible to adequately describe under the current landscape and conditions that are consumer/member centered. Traffic conditions that are unexpected and cause significant delays, these conditions are just as impactful as a clinic who runs excessively late and causes appointments to run longer than anticipated. There is no

consideration for this reality of our Oregon residence diversity of geography, and the expectation of transportation services can easily adjust to health care system disfunction. For example - if someone is hospitalized and needing transport back to a rural area hundreds of miles from the Portland area. The on-time performance expectations doesn't include expectations of the health care provider or clinic or hospital, only the NEMT driver, especially in that example the person is no longer ready for discharge and the driver has to "dead-head" both directions - without any guarantee of compensation. Uber/Lyft has received billions of dollars in investment to offer an on demand transit alternative, NEMT is funded federally at only \$7.5 billion in 2021. Uber/Lyft isn't available in many of our rural areas that also lack telecommunications infrastructure. It is misleading to require this framework in consumer-facing materials without more funding or investment into ensuring the system can respond. It is also misleading to the consumer to allude to the capacity available to accommodate same day scheduling, NEMT is still years away from building the operational infrastructure for especially small and minority business owners without additional technical and monetary resource investments. The runway to meet that expectation is important to achieve, but the fact that it changed overnight from 2019 to 2020 and all same day requests must be met is not based in reality. There is a pathway to get there but years away, and requiring that CCOs can provide it in all areas via the written materials is over promising what is actually possible. The topics that are challenging and inadequate in the riders guide are: - Secure transports for mental health crisis. This is more important to offer technical assistance to Hospitals, health care providers, CCOs, and NEMT Brokerages because of the civil liberties of individuals at stake. - Out of service area and corresponding transport authorizations are exceedingly difficult to maintain when access to health care services is challenging and causes more individuals to seek more options further away. - 15 minute wait times are not transit industry standards (5 minute wait times are) and with health care clinics not obligated to maintain the scheduled pick up times or changes in entire clinic schedules (for example dialysis clinics staff workforce shortages and impacted chair/appointment availability have caused changes in member's appointment times/dates without coordination with the brokerages) but the NEMT driver is held responsible if the appointment runs so far over it risks the next member/passenger pick up. - Screening of mobility devices is a skill set not required of health care staff or authorized representatives assisting members to schedule NEMT services, and their lack of information provided during NEMT scheduling can cause undue complications to coordinating the correct vehicle type or addresses as much as an NEMT Brokerage sending the incorrect vehicle. Travel assessments that screen mobility needs that can change (someone moving from a walker to a manual wheelchair) are not emphasized as helping reduce these issues. More content on this is more informative to a consumer. - updating addresses as a responsibility of a member or their auth rep, NEMT is the only Medicaid benefit that sees the live 24/7 disfunction of the lack of anyone but OHA or one.gov being able to help people change their addresses. Emphasizing or introducing reminders into the Riders Guide seems helpful for improved utilization by members.

Deliverable 6: Continued from previous page

How many OHA staff chose this deliverable? 4

Q107 Primary purpose for deliverable submission to OHA – Responses: 2 out of 4

Document compliance	Share plans / future activities	Report performance for monitoring	Progress report for projects / programs	Inclusion in state / federal reporting	Identify designee / contacts
2 (100% of Q107 responses)	0 (0% of Q107 responses)	0 (0% of Q107 responses)	0 (0% of Q107 responses)	0 (0% of Q107 responses)	0 (0% of Q107 responses)

Q108 How submission information is used by OHA – Responses: 2 out of 4

Acknowledge receipt only	Evaluate / return results (Includes attestations)	Internal reporting	External reporting
0 (0% of Q108 responses)	2 (100% of Q108 responses)	0 (0% of Q108 responses)	0 (0% of Q108 responses)

Q109 Awareness of other OHA staff or units who use information from same deliverable ?

Responses: 2 out of 4

- Yes: 1
- No: 1

Q110 Awareness of other Contract deliverables that ask for the same or similar information?

Responses: 2 out of 4

- Yes: 1
- No: 1

Q111 OHA Staff Involvement – Responses: 2 out of 4

Please tell us about how much time it takes to review the deliverable(s) you evaluate or coordinate.

I am lead for this deliverable	Total staff time required per CCO				
	< 30 minutes	0.5-2 hours	3-5 hours	6-10 hours	11+ hours
0 (0% of Q111 responses)	0 (0% of Q111 responses)	0 (0% of Q111 responses)	0 (0% of Q111 responses)	2 (100% of Q111 responses)	0 (0% of Q111 responses)

Deliverable 7: NEMT Call Center script [Ex. B, Part 2, Sec. 5, Para. f (8)]

How many CCO staff members chose this deliverable? 15

Q5 Staff Involvement – Responses: 14 out of 15

I am lead for this deliverable	Requires help from other staff	Less than 5 total staff hours required	5 – 10 total staff hours required	10-15 total staff hours required	15+ total staff hours required
6 (42.86% of Q5 responses)	10 (71.43% of Q5 responses)	5 (35.71% of Q5 responses)	3 (21.43% of Q5 responses)	3 (21.43% of Q5 responses)	2 (14.29% of Q5 responses)

Q6 Issues – Responses: 8 out of 13

We DO NOT use the information for internal operations	The submission does not change year over year	Another deliverable asks for same info	Deliverable has inconvenient due date	Too many submissions required per year
2 (25% of Q6 responses)	5 (62.50% of Q6 responses)	3 (37.50% of Q6 responses)	1 (12.50% of Q6 responses)	2 (25% of Q6 responses)

Q8 Satisfaction 1 to 5 stars: 1.75 stars

Responses: 3 out of 15

Q9 How should OHA change this deliverable?

Responses: 3 out of 15

- Change the format: 1
- Attestation only: 1
- Remove deliverable: 1

Q10: What other feedback do you have about improving this deliverable?

- Responses: 1 out of 15
 - The NEMT script is part script and part procedure now in order to meet the evaluation criteria. It has many duplicate evaluation criteria with the NEMT P&P. It is a spoken script, but it is scored for readability as if it were written materials.
 - no other CCO function requires a call center scripts deliverable. No other CCO or OHA call center is required to maintain compliance KPI standards. The two requirements are usually in conflict and contradict the success of one in order to achieve the other. If you require it for a specific area - require it for OHP Client Services, Provider Services, and corresponding CCO contact centers. Travel intake, logistics, and profile building cannot be relegated to one single documented call center script that even barely touches on all of the details needed to ensure someone has effective transportation resources. A call center script as required currently is not person-centered, is not based in realistic conversations, it's requiring a 6th-grade reading level - for a verbal script to speak to someone. The more effective tools are the comprehensive training curriculum and materials for the entire contact center, not a single document oversimplifying a very complicated operational system. It does make sense for components to be either within this script deliverable to be codified in policy but not a script. A good customer service representative that is trained on required info needed - will not follow a script and just have a conversation and build rapport with a person calling in. Additionally the call center script is not designed for a significant portion of requests being made by health care provider and clinic staff.

Deliverable 7: Continued from previous page

How many OHA staff chose this deliverable? 3

Q107 Primary purpose for deliverable submission to OHA – Responses: 2 out of 3

Document compliance	Share plans / future activities	Report performance for monitoring	Progress report for projects / programs	Inclusion in state / federal reporting	Identify designee / contacts
2 (100% of Q107 responses)	0 (0% of Q107 responses)	0 (0% of Q107 responses)	0 (0% of Q107 responses)	0 (0% of Q107 responses)	0 (0% of Q107 responses)

Q108 How submission information is used by OHA – Responses: 2 out of 3

Acknowledge receipt only	Evaluate / return results (Includes attestations)	Internal reporting	External reporting
0 (0% of Q108 responses)	2 (100% of Q108 responses)	0 (0% of Q108 responses)	0 (0% of Q108 responses)

Q109 Awareness of other OHA staff or units who use information from same deliverable ?

Responses: 2 out of 3

- Yes: 1
- No: 1

Q110 Awareness of other Contract deliverables that ask for the same or similar information?

Responses: 2 out of 3

- Yes: 0
- No: 1

Q111 OHA Staff Involvement – Responses: 2 out of 3

Please tell us about how much time it takes to review the deliverable(s) you evaluate or coordinate.

I am lead for this deliverable	Total staff time required per CCO				
	< 30 minutes	0.5-2 hours	3-5 hours	6-10 hours	11+ hours
0 (0% of Q111 responses)	0 (0% of Q111 responses)	1 (50% of Q111 responses)	1 (50% of Q111 responses)	0 (100% of Q111 responses)	0 (0% of Q111 responses)

Deliverable 8: NEMT QA quarterly reports [Ex. B, Part 2, Sec. 5, Para. g (3)(a)]

How many CCO staff members chose this deliverable? 15

Q5 Staff Involvement – Responses: 14 out of 15

I am lead for this deliverable	Requires help from other staff	Less than 5 total staff hours required	5 – 10 total staff hours required	10-15 total staff hours required	15+ total staff hours required
6 (42.86% of Q5 responses)	12 (85.71% of Q5 responses)	5 (35.71% of Q5 responses)	1 (7.14% of Q5 responses)	2 (14.29% of Q5 responses)	6 (42.86% of Q5 responses)

Q6 Issues – Responses: 8 out of 15

We DO NOT use the information for internal operations	The submission does not change year over year	Another deliverable asks for same info	Deliverable has inconvenient due date	Too many submissions required per year
2 (25% of Q6 responses)	1 (12.50% of Q6 responses)	0 (0% of Q6 responses)	0 (0% of Q6 responses)	5 (62.5% of Q6 responses)

Q8 Satisfaction 1 to 5 stars: 1.33 stars

Responses: 3 out of 15

Q9 How should OHA change this deliverable?

Responses: 3 out of 15

- Change the format: 1
- None of the above: 2

Q10: What other feedback do you have about improving this deliverable?

- Responses: 3 out of 15
 - This deliverable has been confusing from the start, and the limited instructions available from OHA do not adequately explain how to produce some of the information requested. We have asked for technical assistance and guidance, but received no response.
 - This deliverable needs better guidance and definitions of the data elements required. The information requested is not clear and likely cannot be compared across CCOs because we are all doing it differently.
 - The NEMT QA quarterly report is not a template built by subject matter experts, feedback has never formally been sent back to CCOs. The only feedback received was in summer 2022 where OHA data experts verbally shared issues with how their preference of certain values/fields should be populated. The example shared was if there was not data to populate a field, whether a blank or a 0 was more appropriate. CCOs still have yet to have received formal and written versions of feedback from OHA. The formatting of the data report is extremely challenging because it looks arbitrary and not built from NEMT scheduling and trip software systems used by different CCOs. There are very few NEMT software options in the market, and most can produce differently formatted audit data and more alike to each other even if they are distinct NEMT software vendors. Additionally, this report combines utilization, denials, and payments - where it is challenging to understand if there is duplication across different CCO contract deliverables. HRS L report 6.21 & 6.22 has Flex services for non-medical transports, the trip data would look different than L report - but it is unclear if there was intentional review and assessment of what is captured in one, and where they complement each other rather than potentially duplicate or don't match entirely. The Service Delivery tab combines way too many types of transport values and information for it to easily be compiled, this tab alone takes multiple and separate teams to populate - often adding to potential data integrity

issues because you insert trip data, trip issues, and benefit decisions made that are also potentially reported in other reports. The other example is the potential overlap and duplication of the quarterly Grievance and Appeals logs and reports. Reimbursements tab also contains denial reasons that cannot be distinctively identified in the quarterly G&A logs because of the lack of applicability of categories reflecting NEMT information. And the only two denial reasons listed as "no prior approval" and "other" - other is arbitrary or unclear... is it CCOs responsibility to list the details of "other" or it's just a massive catch-all? We agree that the data across the board captured in this report is helpful and informative to state regulators, but the formatting and sheer complexity of the breadth of data types being asked to populate results in many staff and across multiple areas of disciplines (finance, data specialists, quality assurance, operations, etc). CCOs and more specifically, the NEMT subject matter experts, would be more ideal to assist in providing other standard template examples that can focus on one area of data that can be used overtime to monitor NEMT services across multiple CCOs and years.

How many OHA staff chose this deliverable? 3

Q107 Primary purpose for deliverable submission to OHA – Responses: 2 out of 3

Document compliance	Share plans / future activities	Report performance for monitoring	Progress report for projects / programs	Inclusion in state / federal reporting	Identify designee / contacts
0 (0% of Q107 responses)	0 (0% of Q107 responses)	2 (100% of Q107 responses)	0 (0% of Q107 responses)	0 (0% of Q107 responses)	0 (0% of Q107 responses)

Q108 How submission information is used by OHA – Responses: 2 out of 3

Acknowledge receipt only	Evaluate / return results (Includes attestations)	Internal reporting	External reporting
0 (0% of Q108 responses)	0 (0% of Q108 responses)	2 (100% of Q108 responses)	0 (0% of Q108 responses)

Q109 Awareness of other OHA staff or units who use information from same deliverable ?

Responses: 2 out of 3

- Yes: 1
- No: 1

Q110 Awareness of other Contract deliverables that ask for the same or similar information?

Responses: 2 out of 3

- Yes: 0
- No: 1

Q111 OHA Staff Involvement – Responses: 2 out of 3

Please tell us about how much time it takes to review the deliverable(s) you evaluate or coordinate.

I am lead for this deliverable	Total staff time required per CCO				
	< 30 minutes	0.5-2 hours	3-5 hours	6-10 hours	11+ hours
0 (0% of Q111 responses)	0 (0% of Q111 responses)	0 (0% of Q111 responses)	2 (100% of Q111 responses)	0 (0% of Q111 responses)	0 (0% of Q111 responses)

Deliverable 9: CMS Drug Utilization Review Survey [Ex. B, Part 2, Sec. 7, Para. C]

How many CCO staff members chose this deliverable? 8

Q5 Staff Involvement – Responses: 7 out of 8

I am lead for this deliverable	Requires help from other staff	Less than 5 total staff hours required	5 – 10 total staff hours required	10-15 total staff hours required	15+ total staff hours required
4 (57.14% of Q5 responses)	5 (71.43% of Q5 responses)	0 (0% of Q5 responses)	0 (0% of Q5 responses)	2 (28.57% of Q5 responses)	5 (71.43% of Q5 responses)

Q6 Issues – Responses: 2 out of 8

We DO NOT use the information for internal operations	The submission does not change year over year	Another deliverable asks for same info	Deliverable has inconvenient due date	Too many submissions required per year
0 (0% of Q6 responses)	1 (50% of Q6 responses)	0 (0% of Q6 responses)	1 (50% of Q6 responses)	0 (0% of Q6 responses)

Q8 Satisfaction 1 to 5 stars: 4 stars

Responses: 1 out of 8

Q9 How should OHA change this deliverable?

Responses: 1 out of 8

- Change the format: 1

Q10: What other feedback do you have about improving this deliverable?

- Responses: 1 out of 8
 - This is a CMS-required deliverable, so unlikely it will change. I appreciate the OHA giving us extra time to complete this.

Deliverable 9: Continued from previous page

How many OHA staff chose this deliverable? 1

Q107 Primary purpose for deliverable submission to OHA – Responses: 2 out of 1

Document compliance	Share plans / future activities	Report performance for monitoring	Progress report for projects / programs	Inclusion in state / federal reporting	Identify designee / contacts
0 (0% of Q107 responses)	0 (0% of Q107 responses)	0 (0% of Q107 responses)	0 (0% of Q107 responses)	0 (0% of Q107 responses)	1 (100% of Q107 responses)

Q108 How submission information is used by OHA – Responses: 1 out of 1

Acknowledge receipt only	Evaluate / return results (Includes attestations)	Internal reporting	External reporting
0 (0% of Q108 responses)	1 (100% of Q108 responses)	1 (100% of Q108 responses)	1 (100% of Q108 responses)

Q109 Awareness of other OHA staff or units who use information from same deliverable ?

Responses: 1 out of 1

- Yes: 0
- No: 1

Q110 Awareness of other Contract deliverables that ask for the same or similar information?

Responses: 1 out of 1

- Yes: 0
- No: 1

Q111 OHA Staff Involvement – Responses: 1 out of 1

Please tell us about how much time it takes to review the deliverable(s) you evaluate or coordinate.

I am lead for this deliverable	Total staff time required per CCO				
	< 30 minutes	0.5-2 hours	3-5 hours	6-10 hours	11+ hours
1 (100% of Q111 responses)	0 (0% of Q111 responses)	0 (0% of Q111 responses)	1 (100% of Q111 responses)	0 (0% of Q111 responses)	0 (0% of Q111 responses)

Deliverable 10: Pharmacy Benefit Manager (PBM) market check findings [Ex. B, Part 2, Sec. 7, Para. e (2)(e)i]

How many CCO staff members chose this deliverable? 9

Q5 Staff Involvement – Responses: 8 out of 9

I am lead for this deliverable	Requires help from other staff	Less than 5 total staff hours required	5 – 10 total staff hours required	10-15 total staff hours required	15+ total staff hours required
5 (62.5% of Q5 responses)	6 (75% of Q5 responses)	0 (0% of Q5 responses)	1 (12.5% of Q5 responses)	3 (37.5% of Q5 responses)	4 (50% of Q5 responses)

Q6 Issues – Responses: 2 out of 9

We DO NOT use the information for internal operations	The submission does not change year over year	Another deliverable asks for same info	Deliverable has inconvenient due date	Too many submissions required per year
0 (0% of Q6 responses)	1 (50% of Q6 responses)	0 (0% of Q6 responses)	1 (50% of Q6 responses)	1 (50% of Q6 responses)

Q8 Satisfaction 1 to 5 stars: 2.33 stars

Responses: 3 out of 9

Q9 How should OHA change this deliverable?

Responses: 3 out of 9

- Remove deliverable: 1
- Change from scheduled to ad hoc: 1
- None of the above: 1

Q10: What other feedback do you have about improving this deliverable?

- Responses: 2 out of 9
 - This is a CMS-required deliverable, so unlikely it will change. I appreciate the OHA giving us extra time to complete this.
 - This deliverable is contributing to pharmacy network instability. Annual frequency is too often as it drives PBMs to look at their pharmacy contracted rates each year and drive rates lower at the expense of the pharmacies. I think this is intended to reduce the PBM's profit margin, but it inadvertently reduces the pharmacies profit to an unsustainable level.

Deliverable 10: Continued from previous page

How many OHA staff chose this deliverable? 2

Q107 Primary purpose for deliverable submission to OHA – Responses: 1 out of 2

Document compliance	Share plans / future activities	Report performance for monitoring	Progress report for projects / programs	Inclusion in state / federal reporting	Identify designee / contacts
1 (100% of Q107 responses)	0 (0% of Q107 responses)	0 (0% of Q107 responses)	0 (0% of Q107 responses)	0 (0% of Q107 responses)	0 (0% of Q107 responses)

Q108 How submission information is used by OHA – Responses: 1 out of 2

Acknowledge receipt only	Evaluate / return results (Includes attestations)	Internal reporting	External reporting
1 (100% of Q108 responses)	0 (0% of Q108 responses)	0 (0% of Q108 responses)	0 (0% of Q108 responses)

Q109 Awareness of other OHA staff or units who use information from same deliverable ?

Responses: 1 out of 2

- Yes: 0
- No: 1

Q110 Awareness of other Contract deliverables that ask for the same or similar information?

Responses: 1 out of 2

- Yes: 0
- No: 1

Q111 OHA Staff Involvement – Responses: 1 out of 2

Please tell us about how much time it takes to review the deliverable(s) you evaluate or coordinate.

I am lead for this deliverable	Total staff time required per CCO				
	< 30 minutes	0.5-2 hours	3-5 hours	6-10 hours	11+ hours
1 (100% of Q111 responses)	1 (100% of Q111 responses)	0 (0% of Q111 responses)	0 (0% of Q111 responses)	0 (0% of Q111 responses)	0 (0% of Q111 responses)

Deliverable 11: P4P PBM Subcontract Admin Costs Quarterly Reports [Ex. B, Part 2, Sec. 7, Para. e (4)(b)i]

How many CCO staff members chose this deliverable? 7

Q5 Staff Involvement – Responses: 6 out of 7

I am lead for this deliverable	Requires help from other staff	Less than 5 total staff hours required	5 – 10 total staff hours required	10-15 total staff hours required	15+ total staff hours required
3 (50% of Q5 responses)	2 (33.33% of Q5 responses)	3 (50% of Q5 responses)	1 (16.67% of Q5 responses)	1 (16.67% of Q5 responses)	1 (16.67% of Q5 responses)

Q6 Issues – Responses: 4 out of 7

We DO NOT use the information for internal operations	The submission does not change year over year	Another deliverable asks for same info	Deliverable has inconvenient due date	Too many submissions required per year
3 (75% of Q6 responses)	0 (0% of Q6 responses)	0 (0% of Q6 responses)	0 (0% of Q6 responses)	1 (25% of Q6 responses)

Q8 Satisfaction 1 to 5 stars: 4 stars

Responses: 1 out of 7

Q9 How should OHA change this deliverable?

Responses: 1 out of 7

- None of the above: 1

Q10: What other feedback do you have about improving this deliverable?

- Responses: 0 out of 7

Deliverable 11: Continued from previous page**How many OHA staff chose this deliverable? 2****Q107 Primary purpose for deliverable submission to OHA – Responses: 1 out of 2**

Document compliance	Share plans / future activities	Report performance for monitoring	Progress report for projects / programs	Inclusion in state / federal reporting	Identify designee / contacts
1 (100% of Q107 responses)	0 (0% of Q107 responses)	0 (0% of Q107 responses)	0 (0% of Q107 responses)	0 (0% of Q107 responses)	0 (0% of Q107 responses)

Q108 How submission information is used by OHA – Responses: 1 out of 2

Acknowledge receipt only	Evaluate / return results (Includes attestations)	Internal reporting	External reporting
0 (0% of Q108 responses)	1 (100% of Q108 responses)	0 (0% of Q108 responses)	0 (0% of Q108 responses)

Q109 Awareness of other OHA staff or units who use information from same deliverable ?

Responses: 1 out of 2

- Yes: 0
- No: 1

Q110 Awareness of other Contract deliverables that ask for the same or similar information?

Responses: 1 out of 2

- Yes: 0
- No: 1

Q111 OHA Staff Involvement – Responses: 1 out of 2

Please tell us about how much time it takes to review the deliverable(s) you evaluate or coordinate.

I am lead for this deliverable	Total staff time required per CCO				
	< 30 minutes	0.5-2 hours	3-5 hours	6-10 hours	11+ hours
1 (100% of Q111 responses)	0 (0% of Q111 responses)	1 (100% of Q111 responses)	0 (0% of Q111 responses)	0 (0% of Q111 responses)	0 (0% of Q111 responses)

Deliverable 12: Preferred Drug List and Prior Authorization criteria [Ex. B, Part 2, Sec. 7, Para. e (6)]

How many CCO staff members chose this deliverable? 11

Q5 Staff Involvement – Responses: 10 out of 11

I am lead for this deliverable	Requires help from other staff	Less than 5 total staff hours required	5 – 10 total staff hours required	10-15 total staff hours required	15+ total staff hours required
4 (40% of Q5 responses)	9 (90% of Q5 responses)	1 (10% of Q5 responses)	4 (40% of Q5 responses)	2 (20% of Q5 responses)	3 (30% of Q5 responses)

Q6 Issues – Responses: 6 out of 11

We DO NOT use the information for internal operations	The submission does not change year over year	Another deliverable asks for same info	Deliverable has inconvenient due date	Too many submissions required per year
1 (16.67% of Q6 responses)	1 (16.67% of Q6 responses)	1 (16.67% of Q6 responses)	2 (33.33% of Q6 responses)	3 (50% of Q6 responses)

Q8 Satisfaction 1 to 5 stars: 2.66 stars

Responses: 5 out of 11

Q9 How should OHA change this deliverable?

Responses: 3 out of 11

- Don't change the deliverable: 1
- Change the format: 2
- Remove deliverable: 1

Q10: What other feedback do you have about improving this deliverable?

- Responses: 3 out of 11
 - These have to be posted for the public.
 - Only require if we are removing something from formulary or updating a drug use criteria
 - It is not clear if/how the OHA is using this deliverable. The format makes it challenging to actually show what drugs are on the formulary since it does not list brand name. Also, it is in a different format than our files we post to our website so it takes staff time to create this file. If we could provide the files we post to our website, it would be helpful.
 - We are required to submit this deliverable in two different file formats, but those instructions are not included in any of the guidance with this deliverable. I have a note about a memo from 2020 that I have scheduled to pop up on my calendar before the due date each year so I can verify whether those instructions (that are not posted) are still valid.

Deliverable 12: Continued from previous page

How many OHA staff chose this deliverable? 1

Q107 Primary purpose for deliverable submission to OHA – Responses: 1 out of 1

Document compliance	Share plans / future activities	Report performance for monitoring	Progress report for projects / programs	Inclusion in state / federal reporting	Identify designee / contacts
1 (100% of Q107 responses)	0 (0% of Q107 responses)	0 (0% of Q107 responses)	0 (0% of Q107 responses)	0 (0% of Q107 responses)	0 (0% of Q107 responses)

Q108 How submission information is used by OHA – Responses: 0 out of 1

Acknowledge receipt only	Evaluate / return results (Includes attestations)	Internal reporting	External reporting
0 (0% of Q108 responses)	0 (0% of Q108 responses)	0 (0% of Q108 responses)	0 (0% of Q108 responses)

Q109 Awareness of other OHA staff or units who use information from same deliverable ?

Responses: 1 out of 1

- Yes: 1
- No: 0

Q110 Awareness of other Contract deliverables that ask for the same or similar information?

Responses: 1 out of 1

- Yes: 0
- No: 1

Q111 OHA Staff Involvement – Responses: 1 out of 1

Please tell us about how much time it takes to review the deliverable(s) you evaluate or coordinate.

I am lead for this deliverable	Total staff time required per CCO				
	< 30 minutes	0.5-2 hours	3-5 hours	6-10 hours	11+ hours
0 (0% of Q111 responses)	1 (0% of Q111 responses)	0 (0% of Q111 responses)	0 (0% of Q111 responses)	0 (0% of Q111 responses)	0 (0% of Q111 responses)

Deliverable 13: Intensive Care Coordination (ICC) Policies & Procedures [Ex. B, Part 2, Sec. 8, Para. a (2)]

How many CCO staff members chose this deliverable? 20

Q5 Staff Involvement – Responses: 18 out of 20

I am lead for this deliverable	Requires help from other staff	Less than 5 total staff hours required	5 – 10 total staff hours required	10-15 total staff hours required	15+ total staff hours required
5 (27.78% of Q5 responses)	16 (88.89% of Q5 responses)	2 (11.11% of Q5 responses)	6 (33.33% of Q5 responses)	7 (38.89% of Q5 responses)	3 (16.67% of Q5 responses)

Q6 Issues – Responses: 13 out of 20

We DO NOT use the information for internal operations	The submission does not change year over year	Another deliverable asks for same info	Deliverable has inconvenient due date	Too many submissions required per year
1 (7.69% of Q6 responses)	7 (53.85% of Q6 responses)	3 (28.08% of Q6 responses)	3 (23.08% of Q6 responses)	2 (15.38% of Q6 responses)

Q8 Satisfaction 1 to 5 stars: 2.66 stars

Responses: 3 out of 20

Q9 How should OHA change this deliverable?

Responses: 5 out of 20

- Don't change the deliverable: 1
- Attestation only: 3
- Remove deliverable: 1

Q10: What other feedback do you have about improving this deliverable?

Responses: 3 out of 20

- Once policies are approved by OHA with no additional evaluation findings, attestation only would suffice.
- The deliverables in which CCOs are having to produce various policies is an extremely redundant process. ICC requirements do not change much year-over-year, so an annual submission is excessive. Additionally, these policies are reviewed through the EQRO, and there is no inter-rater reliability on the feedback we receive. How can a CCO pass a policy through EQRO, but OHA has differing feedback. Additionally, EQRO has stated that CCOs now have too many policies, and CCOs have had to create a significant amount of redundant and excessive policies to get through these annual policies review through OHA. The annual policy reviews are a prime example of waste in the healthcare system, as there is duplication, excessive administrative work for the CCOs and OHA, and the outcomes bring little value to the system.
- OHA's method of evaluating P&P documents is cumbersome, time consuming, and of questionable value to operations. Completing the evaluation criteria document takes a great deal of time. I can only imagine it also takes a great deal of time for the OHA reviewers to do the same. Then the revision cycle is often confusing and drawn out over months. There are many repetitive elements in the NEMT P&P evaluation criteria. Reviewer feedback from OHA is uneven. Sections of P&P that met the same criteria last year might not meet this year. Most of the revisions required do not impact the actual operations of the P&P and are just wording changes to more closely match the OAR or contract language. Many times reviewer comments require duplicate information be included across many P&Ps. This practice makes all the P&P documents reviewed by OHA repetitive and more administratively difficult to manage for the CCO.

Deliverable 14: Member Materials, Marketing, Education and Information [Ex. B, Part 3, Sec. 4, Para. F]

How many CCO staff members chose this deliverable? 13

Q5 Staff Involvement – Responses: 12 out of 13

I am lead for this deliverable	Requires help from other staff	Less than 5 total staff hours required	5 – 10 total staff hours required	10-15 total staff hours required	15+ total staff hours required
3 (25% of Q5 responses)	9 (75% of Q5 responses)	2 (16.67% of Q5 responses)	1 (8.33% of Q5 responses)	1 (8.33% of Q5 responses)	8 (66.67% of Q5 responses)

Q6 Issues – Responses: 8 out of 13

We DO NOT use the information for internal operations	The submission does not change year over year	Another deliverable asks for same info	Deliverable has inconvenient due date	Too many submissions required per year
0 (0% of Q6 responses)	1 (12.5% of Q6 responses)	4 (50% of Q6 responses)	0 (0% of Q6 responses)	4 (50% of Q6 responses)

Q8 Satisfaction 1 to 5 stars: 2.25 stars

Responses: 3 out of 13

Q9 How should OHA change this deliverable?

Responses: 3 out of 13

- Change from scheduled to ad hoc: 1
- Remove deliverable: 1
- None of the above: 1

Q10: What other feedback do you have about improving this deliverable?

- Responses: 3 out of 13
 - Although the member material review process has been improved over the past couple of years, it can still be a cumbersome process when needing materials reviewed in a short period of time. Recommend following similar to CMS rules and only Marketing material and handbook need review and approval. Other member communications should be file & use.
 - We like the new form, but advocate that deliverables only need to be resubmitted for approval once per year rather than once every six months.
 - See Coordinated Care Organizations as Medicaid contractors

Deliverable 14: Continued from previous page

How many OHA staff chose this deliverable? 3

Q107 Primary purpose for deliverable submission to OHA – Responses: 2 out of 3

Document compliance	Share plans / future activities	Report performance for monitoring	Progress report for projects / programs	Inclusion in state / federal reporting	Identify designee / contacts
1 (50% of Q107 responses)	0 (0% of Q107 responses)	0 (0% of Q107 responses)	1 (50% of Q107 responses)	0 (0% of Q107 responses)	0 (0% of Q107 responses)

Q108 How submission information is used by OHA – Responses: 2 out of 3

Acknowledge receipt only	Evaluate / return results (Includes attestations)	Internal reporting	External reporting
1 (50% of Q108 responses)	1 (50% of Q108 responses)	0 (0% of Q108 responses)	0 (0% of Q108 responses)

Q109 Awareness of other OHA staff or units who use information from same deliverable ?

Responses: 1 out of 3

- Yes: 1
- No: 0

Q110 Awareness of other Contract deliverables that ask for the same or similar information?

Responses: 1 out of 3

- Yes: 0
- No: 1

Q111 OHA Staff Involvement – Responses: 2 out of 3

Please tell us about how much time it takes to review the deliverable(s) you evaluate or coordinate.

I am lead for this deliverable	Total staff time required per CCO				
	< 30 minutes	0.5-2 hours	3-5 hours	6-10 hours	11+ hours
2 (100% of Q111 responses)	0 (0% of Q111 responses)	0 (0% of Q111 responses)	0 (50% of Q111 responses)	0 (0% of Q111 responses)	1 (50% of Q111 responses)

Deliverable 15: Member Handbook [Ex. B, Part 3, Sec. 5, Para. B]

How many CCO staff members chose this deliverable? 30

Q5 Staff Involvement – Responses: 28 out of 30

I am lead for this deliverable	Requires help from other staff	Less than 5 total staff hours required	5 – 10 total staff hours required	10-15 total staff hours required	15+ total staff hours required
5 (17.86% of Q5 responses)	21 (21% of Q5 responses)	9 (32.14% of Q5 responses)	1 (3.57% of Q5 responses)	3 (10.71% of Q5 responses)	14 (50% of Q5 responses)

Q6 Issues – Responses: 8 out of 30

We DO NOT use the information for internal operations	The submission does not change year over year	Another deliverable asks for same info	Deliverable has inconvenient due date	Too many submissions required per year
0 (0% of Q6 responses)	2 (15.38% of Q6 responses)	5 (38.46% of Q6 responses)	3 (23.08% of Q6 responses)	5 (38.46% of Q6 responses)

Q8 Satisfaction 1 to 5 stars: 3.3 stars

Responses: 3 out of 30

Q9 How should OHA change this deliverable?

Responses: 3 out of 30

- Change the format: 2
- None of the above: 1

Q10: What other feedback do you have about improving this deliverable?

- Responses: 3 out of 30
 - The OHA set timelines and delays make it very difficult for YCCO to complete and make available for member to view by the top of each year.
 - The model handbook from OHA was a helpful improvement to this deliverable. However, during HSAG audit there was findings not met in the handbook even though model language was used. Recommend ensuring all requirements are met in model to reduce findings during audit.
 - Would love to submit the deliverable all in one place, rather than emailing the QA team the excel spreadsheet and then uploading the document to SharePoint. We really appreciated the model member handbook for 2023, it made things so much easier and really appreciate the emphasis on creating that guide!

Deliverable 15: Continued from previous page

How many OHA staff chose this deliverable? 7

Q107 Primary purpose for deliverable submission to OHA – Responses: 5 out of 7

Document compliance	Share plans / future activities	Report performance for monitoring	Progress report for projects / programs	Inclusion in state / federal reporting	Identify designee / contacts
3 (60% of Q107 responses)	1 (20% of Q107 responses)	1 (20% of Q107 responses)	0 (0% of Q107 responses)	0 (0% of Q107 responses)	0 (0% of Q107 responses)

Q108 How submission information is used by OHA – Responses: 5 out of 7

Acknowledge receipt only	Evaluate / return results (Includes attestations)	Internal reporting	External reporting
1 (20% of Q108 responses)	5 (100% of Q108 responses)	0 (0% of Q108 responses)	0 (0% of Q108 responses)

Q109 Awareness of other OHA staff or units who use information from same deliverable?

Responses: 5 out of 7

- Yes: 1
- No: 4

Q110 Awareness of other Contract deliverables that ask for the same or similar information?

Responses: 5 out of 7

- Yes: 1
- No: 4

Q111 OHA Staff Involvement – Responses: 5 out of 7

Please tell us about how much time it takes to review the deliverable(s) you evaluate or coordinate.

I am lead for this deliverable	Total staff time required per CCO				
	< 30 minutes	0.5-2 hours	3-5 hours	6-10 hours	11+ hours
1 (20% of Q111 responses)	0 (0% of Q111 responses)	0 (0% of Q111 responses)	0 (50% of Q111 responses)	3 (60% of Q111 responses)	2 (40% of Q111 responses)

Deliverable 16: Subcontractor and Delegated Work Report [Ex. B, Part 4, Sec. 11, Para. a (8)]

How many CCO staff members chose this deliverable? 25

Q5 Staff Involvement – Responses: 21 out of 25

I am lead for this deliverable	Requires help from other staff	Less than 5 total staff hours required	5 – 10 total staff hours required	10-15 total staff hours required	15+ total staff hours required
7 (33.33% of Q5 responses)	13 (61.90% of Q5 responses)	5 (23.81% of Q5 responses)	5 (23.81% of Q5 responses)	4 (19.05% of Q5 responses)	5 (23.81% of Q5 responses)

Q6 Issues – Responses: 17 out of 25

We DO NOT use the information for internal operations	The submission does not change year over year	Another deliverable asks for same info	Deliverable has inconvenient due date	Too many submissions required per year
2 (11.76% of Q6 responses)	8 (47.06% of Q6 responses)	5 (29.41% of Q6 responses)	4 (23.53% of Q6 responses)	4 (23.53% of Q6 responses)

Q8 Satisfaction 1 to 5 stars: 2.15 stars

Responses: 5 out of 25

Q9 How should OHA change this deliverable?

Responses: 5 out of 25

- Change the format: 3
- Don't change the deliverable: 1
- Change from scheduled to ad hoc: 1

Q10: What other feedback do you have about improving this deliverable?

- Responses: 4 out of 25
 - Change to a quarterly approach rather than 30 days post change & annual. Different format: form for the changes only with checklist of what needs to be provided. Clearer expectations so feedback doesn't require so much overhaul. Faster feedback times so that re-submissions become timely and not redundant.
 - I understand the deliverable and concept of it but the due dates are very confusing and make it hard to track. Having one due date with a 180 day window and having flexibility anywhere in there without a hard due date and having a due date from 30 days from whatever date fell within that 180 day window makes it very difficult
 - As this deliverable does not typically change from year to year once established, I would recommend only providing the deliverable upon any change to a delegation, an annual submission does not seem necessary.
 - There is too much interpretation of the contract by OHA reviewers. They have been great of offering TA services when we have questions, but it is really hard to see the value of this deliverable.

Deliverable 16: Continued from previous page

How many OHA staff chose this deliverable? 6

Q107 Primary purpose for deliverable submission to OHA – Responses: 5 out of 6

Document compliance	Share plans / future activities	Report performance for monitoring	Progress report for projects / programs	Inclusion in state / federal reporting	Identify designee / contacts
3 (60% of Q107 responses)	0 (0% of Q107 responses)	1 (20% of Q107 responses)	0 (0% of Q107 responses)	0 (0% of Q107 responses)	1 (20% of Q107 responses)

Q108 How submission information is used by OHA – Responses: 5 out of 6

Acknowledge receipt only	Evaluate / return results (Includes attestations)	Internal reporting	External reporting
0 (0% of Q108 responses)	5 (100% of Q108 responses)	3 (60% of Q108 responses)	1 (20% of Q108 responses)

Q109 Awareness of other OHA staff or units who use information from same deliverable?

Responses: 4 out of 6

- Yes: 2
- No: 2

Q110 Awareness of other Contract deliverables that ask for the same or similar information?

Responses: 4 out of 6

- Yes: 1
- No: 3

Q111 OHA Staff Involvement – Responses: 5 out of 6

Please tell us about how much time it takes to review the deliverable(s) you evaluate or coordinate.

I am lead for this deliverable	Total staff time required per CCO				
	< 30 minutes	0.5-2 hours	3-5 hours	6-10 hours	11+ hours
1 (20% of Q111 responses)	0 (0% of Q111 responses)	1 (20% of Q111 responses)	2 (40% of Q111 responses)	0 (0% of Q111 responses)	1 (20% of Q111 responses)

Deliverable 17: Interpreter Services Self-Assessment [Ex. B, Part 4, Sec. 2, Para. k (1)]

How many CCO staff members chose this deliverable? 16

Q5 Staff Involvement – Responses: 15 out of 16

I am lead for this deliverable	Requires help from other staff	Less than 5 total staff hours required	5 – 10 total staff hours required	10-15 total staff hours required	15+ total staff hours required
5 (33.33% of Q5 responses)	12 (80% of Q5 responses)	3 (20% of Q5 responses)	3 (20% of Q5 responses)	3 (20% of Q5 responses)	5 (33.33% of Q5 responses)

Q6 Issues – Responses: 6 out of 16

We DO NOT use the information for internal operations	The submission does not change year over year	Another deliverable asks for same info	Deliverable has inconvenient due date	Too many submissions required per year
1 (16.67% of Q6 responses)	1 (16.67% of Q6 responses)	1 (16.67% of Q6 responses)	3 (50% of Q6 responses)	0 (0% of Q6 responses)

Q8 Satisfaction 1 to 5 stars: 1 star

Responses: 1 out of 16

Q9 How should OHA change this deliverable?

Responses: 1 out of 16

- None of the above: 1

Q10: What other feedback do you have about improving this deliverable?

- Responses: 1 out of 16
 - This reporting is for the Quality Incentive Metric. There are fundamental flaws with this measure which have been loudly voiced from providers and CCOs. While we support the intent of the measure it requires a huge amount of time and resources to collect information that is ultimately not reflective of the intent of the measure. The self-assessment and data collection portion ultimately do not reflect the availability or quality of interpretation services available to members.

Deliverable 17: Continued from previous page

How many OHA staff chose this deliverable? 3

Q107 Primary purpose for deliverable submission to OHA – Responses: 2 out of 3

Document compliance	Share plans / future activities	Report performance for monitoring	Progress report for projects / programs	Inclusion in state / federal reporting	Identify designee / contacts
0 (0% of Q107 responses)	0 (0% of Q107 responses)	2 (100% of Q107 responses)	0 (0% of Q107 responses)	0 (0% of Q107 responses)	0 (0% of Q107 responses)

Q108 How submission information is used by OHA – Responses: 2 out of 3

Acknowledge receipt only	Evaluate / return results (Includes attestations)	Internal reporting	External reporting
1 (50% of Q108 responses)	2 (100% of Q108 responses)	2 (100% of Q108 responses)	2 (100% of Q108 responses)

Q109 Awareness of other OHA staff or units who use information from same deliverable?

Responses: 2 out of 3

- Yes: 2
- No: 0

Q110 Awareness of other Contract deliverables that ask for the same or similar information?

Responses: 2 out of 3

- Yes: 2
- No: 0

Q111 OHA Staff Involvement – Responses: 2 out of 3

Please tell us about how much time it takes to review the deliverable(s) you evaluate or coordinate.

I am lead for this deliverable	Total staff time required per CCO				
	< 30 minutes	0.5-2 hours	3-5 hours	6-10 hours	11+ hours
1 (50% of Q111 responses)	0 (0% of Q111 responses)	0 (0% of Q111 responses)	2 (100% of Q111 responses)	0 (0% of Q111 responses)	0 (0% of Q111 responses)

Deliverable 18: Language Access and Interpreter Services Quarterly Reports [Ex. B, Part 4, Sec. 2, Para. k (2)]

How many CCO staff members chose this deliverable? 22

Q5 Staff Involvement – Responses: 21 out of 22

I am lead for this deliverable	Requires help from other staff	Less than 5 total staff hours required	5 – 10 total staff hours required	10-15 total staff hours required	15+ total staff hours required
9 (42.86% of Q5 responses)	19 (90.48% of Q5 responses)	3 (14.29% of Q5 responses)	4 (19.05% of Q5 responses)	6 (28.57% of Q5 responses)	8 (38.10% of Q5 responses)

Q6 Issues – Responses: 11 out of 22

We DO NOT use the information for internal operations	The submission does not change year over year	Another deliverable asks for same info	Deliverable has inconvenient due date	Too many submissions required per year
2 (18.18% of Q6 responses)	0 (0% of Q6 responses)	2 (18.18% of Q6 responses)	2 (18.18% of Q6 responses)	10 (90.91% of Q6 responses)

Q8 Satisfaction 1 to 5 stars: 2 stars

Responses: 7 out of 22

Q9 How should OHA change this deliverable?

Responses: 7 out of 22

- Change the format: 2
- Remove the deliverable: 1
- Attestation only: 1
- None of the above: 3

Q10: What other feedback do you have about improving this deliverable?

Responses: 7 out of 22

- There is an incredible amount of overlap between this deliverable and the CCO Meaningful Language Access metric however the specifications, process and format do not align perfectly. This means that we have to more or less do the work 2x.
- We are still heavily working on how to collect this data from providers. Providers Do Not want to collect this data because it is very administratively burdensome. There is so much infrastructure that needs to be built. COVID has really impacted our staff and health systems. We are just now beginning to recover and start to establish systems and rebuild infrastructure that was lost. If this is going to continue to be a deliverable I would like to support form OHA on how we can get this from providers. Not that it is now mandatory through the state, but what is their incentive for helping us with this? Because they do want to help, but they do not have the time to collect data like this.
- The OHA data is unreliable and the chart review process produces extra burn out on our clinic partners. The rate derived from this deliverable is erroneous based on the incorrect interpreter flags present in the OHA data.
- Does not make sense that this report is a 12 month rolling due every quarter. Feels more appropriate for a once annual submission for calendar year. AND would like to see CCO Incentive Metric use this data report rather than submitting separate reports. AND it's not clear to me how OHA uses this data. The feedback reports are not very comprehensive or helpful...
- This reporting is for the Quality Incentive Metric. There are fundamental flaws with this measure which have been loudly voiced from providers and CCOs. While we support the intent of the measure it

requires a huge amount of time and resources to collect information that is ultimately not reflective of the intent of the measure. The self-assessment and data collection portion ultimately do not reflect the availability or quality of interpretation services available to members.

- The data collection process for this deliverable is very manual and time consuming. Having to do this on a quarterly basis requires a lot of staff time for both the CCO and providers. Additionally there is overlap with this deliverable and one of the CCO incentive measures.
- The guidance and reporting requirements are confusing with no evaluation or analysis calculations made publicly available to determine if the right data elements are being included.

How many OHA staff chose this deliverable? 4

Q107 Primary purpose for deliverable submission to OHA – Responses: 3 out of 4

Document compliance	Share plans / future activities	Report performance for monitoring	Progress report for projects / programs	Inclusion in state / federal reporting	Identify designee / contacts
0 (0% of Q107 responses)	0 (0% of Q107 responses)	3 (100% of Q107 responses)	0 (0% of Q107 responses)	0 (0% of Q107 responses)	0 (0% of Q107 responses)

Q108 How submission information is used by OHA – Responses: 3 out of 4

Acknowledge receipt only	Evaluate / return results (Includes attestations)	Internal reporting	External reporting
1 (33.33% of Q108 responses)	3 (100% of Q108 responses)	3 (100% of Q108 responses)	3 (100% of Q108 responses)

Q109 Awareness of other OHA staff or units who use information from same deliverable?

Responses: 3 out of 4

- Yes: 3
- No: 0

Q110 Awareness of other Contract deliverables that ask for the same or similar information?

Responses: 3 out of 4

- Yes: 2
- No: 1

Q111 OHA Staff Involvement – Responses: 3 out of 4

Please tell us about how much time it takes to review the deliverable(s) you evaluate or coordinate.

I am lead for this deliverable	Total staff time required per CCO				
	< 30 minutes	0.5-2 hours	3-5 hours	6-10 hours	11+ hours
1 (33.33% of Q111 responses)	0 (0% of Q111 responses)	1 (33.33% of Q111 responses)	2 (66.67% of Q111 responses)	0 (0% of Q111 responses)	0 (0% of Q111 responses)

Deliverable 19: Annual Report with facility-level data about all Members who are assigned to a PCPCH Provider [Ex. B, Part 4, Sec. 6, Para. b]

How many CCO staff members chose this deliverable? 13

Q5 Staff Involvement – Responses: 12 out of 13

I am lead for this deliverable	Requires help from other staff	Less than 5 total staff hours required	5 – 10 total staff hours required	10-15 total staff hours required	15+ total staff hours required
5 (41.67% of Q5 responses)	8 (66.67% of Q5 responses)	6 (50% of Q5 responses)	2 (16.67% of Q5 responses)	2 (16.67% of Q5 responses)	2 (16.67% of Q5 responses)

Q6 Issues – Responses: 8 out of 13

We DO NOT use the information for internal operations	The submission does not change year over year	Another deliverable asks for same info	Deliverable has inconvenient due date	Too many submissions required per year
5 (62.50% of Q6 responses)	0 (0% of Q6 responses)	4 (50% of Q6 responses)	2 (25% of Q6 responses)	2 (25% of Q6 responses)

Q8 Satisfaction 1 to 5 stars: 2 stars

Responses: 2 out of 13

Q9 How should OHA change this deliverable?

Responses: 2 out of 13

- Remove the deliverable: 1
- Change the format: 1

Q10: What other feedback do you have about improving this deliverable?

Responses: 1 out of 13

- We capture this information and report it in the TQS PCPCH section
- Does not make sense that this report is a 12 month rolling due every quarter. Feels more appropriate for a once annual submission for calendar year. AND would like to see CCO Incentive Metric use this data report rather than submitting separate reports. AND it's not clear to me how OHA uses this data. The feedback reports are not very comprehensive or helpful...

Deliverable 20: Long Term Services and Supports (LTSS) MOU Updates [Ex. B, Part 4, Sec. 7, Para. d (1)]

How many CCO staff members chose this deliverable? 19

Q5 Staff Involvement – Responses: 17 out of 19

I am lead for this deliverable	Requires help from other staff	Less than 5 total staff hours required	5 – 10 total staff hours required	10-15 total staff hours required	15+ total staff hours required
8 (47.06% of Q5 responses)	16 (94.12% of Q5 responses)	1 (5.88% of Q5 responses)	3 (17.65% of Q5 responses)	3 (17.65% of Q5 responses)	10 (58.82% of Q5 responses)

Q6 Issues – Responses: 10 out of 19

We DO NOT use the information for internal operations	The submission does not change year over year	Another deliverable asks for same info	Deliverable has inconvenient due date	Too many submissions required per year
0 (0% of Q6 responses)	3 (30% of Q6 responses)	4 (40% of Q6 responses)	4 (40% of Q6 responses)	0 (0% of Q6 responses)

Q8 Satisfaction 1 to 5 stars: 1.5 stars

Responses: 2 out of 19

Q9 How should OHA change this deliverable?

Responses: 4 out of 19

- Change from scheduled to ad hoc: 1
- Remove the deliverable: 1
- Change the format: 1
- None of the above: 1

Q10: What other feedback do you have about improving this deliverable?

Responses: 3 out of 19

- I understand the intent of the deliverable however some of our regional APD/AAA offices (JCC, CPCCO, Health Share) don't want to help us meet these deliverables and it often feels like a waste of time.
- The reporting format is really difficult. There should be more effective metrics to monitor if that is what you are wanting. you have selected a group of folks that often fall into highly cared for or not buckets. So many generally do not need care coordination because they already have so many supports in place, and then there are others who are new and do not but once in place they are fine. So some of the metrics do not make sense, or we may be penalized as not meeting. Our efforts would be better focused else where rather than focused on folks already engaged and in service.
- The MOU and annual monthly reporting requirements do not match what is industry available for tracking and reporting of these services. The poor lead up and lack of glidepath has resulted in reporting requirements without developing the cross systems reporting capabilities.

Deliverable 20: Continued from previous page

How many OHA staff chose this deliverable? 1

Q107 Primary purpose for deliverable submission to OHA – Responses: 1 out of 1

Document compliance	Share plans / future activities	Report performance for monitoring	Progress report for projects / programs	Inclusion in state / federal reporting	Identify designee / contacts
1 (100% of Q107 responses)	0 (0% of Q107 responses)	0 (0% of Q107 responses)	0 (0% of Q107 responses)	0 (0% of Q107 responses)	0 (0% of Q107 responses)

Q108 How submission information is used by OHA – Responses: 1 out of 1

Acknowledge receipt only	Evaluate / return results (Includes attestations)	Internal reporting	External reporting
0 (0% of Q108 responses)	1 (100% of Q108 responses)	1 (100% of Q108 responses)	1 (100% of Q108 responses)

Q109 Awareness of other OHA staff or units who use information from same deliverable?

Responses: 1 out of 1

- Yes: 1
- No: 0

Q110 Awareness of other Contract deliverables that ask for the same or similar information?

Responses: 1 out of 1

- Yes: 0
- No: 1

Q111 OHA Staff Involvement – Responses: 1 out of 1

Please tell us about how much time it takes to review the deliverable(s) you evaluate or coordinate.

I am lead for this deliverable	Total staff time required per CCO				
	< 30 minutes	0.5-2 hours	3-5 hours	6-10 hours	11+ hours
1 (100% of Q111 responses)	0 (0% of Q111 responses)	0 (0% of Q111 responses)	1 (100% of Q111 responses)	0 (0% of Q111 responses)	0 (0% of Q111 responses)

Deliverable 21: LTSS MOU Coordination Activities and Metrics [Ex. B, Part 4, Sec. 7, Para. d (3)]

How many CCO staff members chose this deliverable? 20

Q5 Staff Involvement – Responses: 18 out of 20

I am lead for this deliverable	Requires help from other staff	Less than 5 total staff hours required	5 – 10 total staff hours required	10-15 total staff hours required	15+ total staff hours required
8 (44.44% of Q5 responses)	17 (94.44% of Q5 responses)	1 (5.56% of Q5 responses)	4 (22.22% of Q5 responses)	2 (11.11% of Q5 responses)	11 (61.11% of Q5 responses)

Q6 Issues – Responses: 11 out of 20

We DO NOT use the information for internal operations	The submission does not change year over year	Another deliverable asks for same info	Deliverable has inconvenient due date	Too many submissions required per year
2 (18.18% of Q6 responses)	2 (18.18% of Q6 responses)	5 (45.45% of Q6 responses)	5 (45.45% of Q6 responses)	4 (9.09% of Q6 responses)

Q8 Satisfaction 1 to 5 stars: 1 star

Responses: 3 out of 20

Q9 How should OHA change this deliverable?

Responses: 5 out of 20

- Change the format: 3
- Remove deliverable: 1
- None of the above: 1

Q10: What other feedback do you have about improving this deliverable?

Responses: 4 out of 20

- Clear and meaningful feedback should be provided to CCO's working on this deliverable. Guidance has been unclear, and technical assistance sessions were unhelpful in resolving out questions surrounding feedback. Many hours were spent reviewing guidance, and attending TA sessions.
- The reporting requirements require a great deal of manual tracking as we do not have easily accessible data internally or from the LTSS agencies. Requesting detailed data from the agencies will create a greater burden on an already taxed team.
- They type of data requested in this deliverable is somewhat duplicative and cumbersome to collect and calculate. Only the necessary information which will be used to improve care should be required.
- A lot of the data being requested is not routinely available in CCOs system. Also, some of the deficiencies involve DHS participation and there is really no oversight to get DHS engaged.
- The OHA should consider re-evaluating each domain and the required reporting elements to discuss with CCOs and learn from each other. I expect you may find that there are better metrics to evaluate each domain that better align with CCO operations and reporting system capabilities. This report requires an excessive amount of manual tracking and reporting. This report takes months for our leadership staff to prepare (Manager and VP). It has been a major challenge for addressing other important issues that need addressing in care coordination. This deliverable is well-intentioned and has very knowledgeable and responsive OHA staff supporting it. However, I feel it is the deliverable that I support that most needs addressing to balance the need for the data and the amount of time it is taking CCOs to track and report. CCO input is crucial on this deliverable.

Deliverable 21: Continued from previous page

How many OHA staff chose this deliverable? 2

Q107 Primary purpose for deliverable submission to OHA – Responses: 1 out of 2

Document compliance	Share plans / future activities	Report performance for monitoring	Progress report for projects / programs	Inclusion in state / federal reporting	Identify designee / contacts
0 (0% of Q107 responses)	0 (0% of Q107 responses)	1 (100% of Q107 responses)	0 (0% of Q107 responses)	0 (0% of Q107 responses)	0 (0% of Q107 responses)

Q108 How submission information is used by OHA – Responses: 1 out of 2

Acknowledge receipt only	Evaluate / return results (Includes attestations)	Internal reporting	External reporting
0 (0% of Q108 responses)	1 (100% of Q108 responses)	1 (100% of Q108 responses)	1 (100% of Q108 responses)

Q109 Awareness of other OHA staff or units who use information from same deliverable?

Responses: 1 out of 2

- Yes: 1
- No: 0

Q110 Awareness of other Contract deliverables that ask for the same or similar information?

Responses: 1 out of 2

- Yes: 0
- No: 1

Q111 OHA Staff Involvement – Responses: 1 out of 2

Please tell us about how much time it takes to review the deliverable(s) you evaluate or coordinate.

I am lead for this deliverable	Total staff time required per CCO				
	< 30 minutes	0.5-2 hours	3-5 hours	6-10 hours	11+ hours
1 (100% of Q111 responses)	0 (0% of Q111 responses)	0 (0% of Q111 responses)	0 (0% of Q111 responses)	0 (0% of Q111 responses)	1 (100% of Q111 responses)

Deliverable 22: Care Coordination Activities Report [Ex. B, Part 4, Sec. 7, Para. H]

How many CCO staff members chose this deliverable? 16

Q5 Staff Involvement – Responses: 14 out of 16

I am lead for this deliverable	Requires help from other staff	Less than 5 total staff hours required	5 – 10 total staff hours required	10-15 total staff hours required	15+ total staff hours required
6 (42.86% of Q5 responses)	11 (78.57% of Q5 responses)	0 (0% of Q5 responses)	2 (14.29% of Q5 responses)	3 (21.43% of Q5 responses)	9 (64.29% of Q5 responses)

Q6 Issues – Responses: 12 out of 16

We DO NOT use the information for internal operations	The submission does not change year over year	Another deliverable asks for same info	Deliverable has inconvenient due date	Too many submissions required per year
5 (41.67% of Q6 responses)	1 (8.33% of Q6 responses)	3 (25% of Q6 responses)	3 (25% of Q6 responses)	7 (58.33% of Q6 responses)

Q8 Satisfaction 1 to 5 stars: 1.8 stars

Responses: 3 out of 16

Q9 How should OHA change this deliverable?

Responses: 3 out of 16

- Change the format: 1
- Combine with another deliverable: 1
- None of the above: 1

Q10: What other feedback do you have about improving this deliverable?

Responses: 3 out of 16

- How does OHA use the data? the data does not seem to capture the activities/services that we provide in care coordination and does not feel useful.
- The data collected by this deliverable seems arbitrary and gives little to no insight into actual care coordination being performed. An outcome-based measure would be more illustrative of the intent behind the care coordination rules.
- Reducing the frequency of this report to annual would be helpful. This is another labor-intensive report, but it has improved greatly over the past few years. I appreciate the OHA listening to CCO's feedback to make improvements in the accuracy and efficiency of reporting this data. Also, please do not require reporting of this before May. Care Coordination leadership are pulled away from operations in order to focus much of their time on reporting during the first four months of the year. Anything to cut down CCO time spent preparing deliverables would be helpful to ensure we are focusing a more balanced amount of time on these activities throughout the year.

Deliverable 22: Continued from previous page

How many OHA staff chose this deliverable? 5

Q107 Primary purpose for deliverable submission to OHA – Responses: 3 out of 5

Document compliance	Share plans / future activities	Report performance for monitoring	Progress report for projects / programs	Inclusion in state / federal reporting	Identify designee / contacts
0 (0% of Q107 responses)	0 (0% of Q107 responses)	3 (100% of Q107 responses)	0 (0% of Q107 responses)	0 (0% of Q107 responses)	0 (0% of Q107 responses)

Q108 How submission information is used by OHA – Responses: 3 out of 5

Acknowledge receipt only	Evaluate / return results (Includes attestations)	Internal reporting	External reporting
1 (33.33% of Q108 responses)	2 (66.67% of Q108 responses)	3 (100% of Q108 responses)	2 (66.67% of Q108 responses)

Q109 Awareness of other OHA staff or units who use information from same deliverable?

Responses: 2 out of 5

- Yes: 2
- No: 0

Q110 Awareness of other Contract deliverables that ask for the same or similar information?

Responses: 2 out of 5

- Yes: 1
- No: 1

Q111 OHA Staff Involvement – Responses: 2 out of 6

Please tell us about how much time it takes to review the deliverable(s) you evaluate or coordinate.

I am lead for this deliverable	Total staff time required per CCO				
	< 30 minutes	0.5-2 hours	3-5 hours	6-10 hours	11+ hours
1 (50% of Q111 responses)	0 (0% of Q111 responses)	1 (50% of Q111 responses)	0 (0% of Q111 responses)	0 (0% of Q111 responses)	0 (0% of Q111 responses)

Deliverable 23: Subcontractor Performance Report [Ex. B, Part 4, Sec. 11, Para. a. (13-16)]

How many CCO staff members chose this deliverable? 19

Q5 Staff Involvement – Responses: 16 out of 19

I am lead for this deliverable	Requires help from other staff	Less than 5 total staff hours required	5 – 10 total staff hours required	10-15 total staff hours required	15+ total staff hours required
6 (37.50% of Q5 responses)	9 (56.25% of Q5 responses)	3 (18.75% of Q5 responses)	2 (12.50% of Q5 responses)	4 (25% of Q5 responses)	6 (37.50% of Q5 responses)

Q6 Issues – Responses: 11 out of 19

We DO NOT use the information for internal operations	The submission does not change year over year	Another deliverable asks for same info	Deliverable has inconvenient due date	Too many submissions required per year
1 (9.09% of Q6 responses)	3 (27.27% of Q6 responses)	7 (63.64% of Q6 responses)	5 (45.45% of Q6 responses)	3 (27.27% of Q6 responses)

Q8 Satisfaction 1 to 5 stars: 1.0 stars

Responses: 3 out of 19

Q9 How should OHA change this deliverable?

Responses: 4 out of 19

- Remove deliverable: 4

Q10: What other feedback do you have about improving this deliverable?

Responses: 3 out of 19

- Subcontractors performance reviews are collected through the annual FWA Assessment, submitting a subcontractor performance report is duplicating information provided through another deliverable.
- This deliverable regarding subcontract audits and corrective actions plans should be plan level information. The CCO should not be required to address the OHA findings of a subcontractor for their deficiencies as required by the Contract. In addition, the time frame for submitting information to OHA on the audit, cap and closure of cap is to tight of a turnaround time for the CCO.
- This is reviewed by HSAG during annual Program Integrity Audits.
- It is an excessive deliverable that does not bring much value.

Deliverable 23: Continued from previous page

How many OHA staff chose this deliverable? 5

Q107 Primary purpose for deliverable submission to OHA – Responses: 4 out of 5

Document compliance	Share plans / future activities	Report performance for monitoring	Progress report for projects / programs	Inclusion in state / federal reporting	Identify designee / contacts
0 (0% of Q107 responses)	0 (0% of Q107 responses)	4 (100% of Q107 responses)	0 (0% of Q107 responses)	0 (0% of Q107 responses)	0 (0% of Q107 responses)

Q108 How submission information is used by OHA – Responses: 4 out of 5

Acknowledge receipt only	Evaluate / return results (Includes attestations)	Internal reporting	External reporting
0 (0% of Q108 responses)	4 (100% of Q108 responses)	1 (25% of Q108 responses)	0 (0% of Q108 responses)

Q109 Awareness of other OHA staff or units who use information from same deliverable?

Responses: 3 out of 5

- Yes: 1
- No: 2

Q110 Awareness of other Contract deliverables that ask for the same or similar information?

Responses: 3 out of 5

- Yes: 2
- No: 1

Q111 OHA Staff Involvement – Responses: 4 out of 5

Please tell us about how much time it takes to review the deliverable(s) you evaluate or coordinate.

I am lead for this deliverable	Total staff time required per CCO				
	< 30 minutes	0.5-2 hours	3-5 hours	6-10 hours	11+ hours
1 (25% of Q111 responses)	0 (0% of Q111 responses)	1 (25% of Q111 responses)	1 (25% of Q111 responses)	0 (0% of Q111 responses)	1 (25% of Q111 responses)

Deliverable 24: Third Party Liability Recovery (TPLR) Policies and Procedures [Ex. B, Part 8, Sec. 17, Para. G]

How many CCO staff members chose this deliverable? 11

Q5 Staff Involvement – Responses: 1 out of 11

I am lead for this deliverable	Requires help from other staff	Less than 5 total staff hours required	5 – 10 total staff hours required	10-15 total staff hours required	15+ total staff hours required
1 (100% of Q5 responses)	0 (0% of Q5 responses)	0 (0% of Q5 responses)	1 (100% of Q5 responses)	0 (0% of Q5 responses)	0 (0% of Q5 responses)

Q6 Issues – Responses: 1 out of 11

We DO NOT use the information for internal operations	The submission does not change year over year	Another deliverable asks for same info	Deliverable has inconvenient due date	Too many submissions required per year
0 (0% of Q6 responses)	0 (0% of Q6 responses)	0 (0% of Q6 responses)	1 (100% of Q6 responses)	0 (0% of Q6 responses)

Q8 Satisfaction 1 to 5 stars: 5 stars

Responses: 1 out of 11

Q9 How should OHA change this deliverable?

Responses: 1 out of 11

- Don't change deliverable: 1

Q10: What other feedback do you have about improving this deliverable?

Responses: 0 out of 11

Deliverable 24: Continued from previous page

How many OHA staff chose this deliverable? 4

Q107 Primary purpose for deliverable submission to OHA – Responses: 4 out of 4

Document compliance	Share plans / future activities	Report performance for monitoring	Progress report for projects / programs	Inclusion in state / federal reporting	Identify designee / contacts
0 (0% of Q107 responses)	0 (0% of Q107 responses)	4 (100% of Q107 responses)	0 (0% of Q107 responses)	0 (0% of Q107 responses)	0 (0% of Q107 responses)

Q108 How submission information is used by OHA – Responses: 4 out of 4

Acknowledge receipt only	Evaluate / return results (Includes attestations)	Internal reporting	External reporting
0 (0% of Q108 responses)	4 (100% of Q108 responses)	1 (25% of Q108 responses)	0 (0% of Q108 responses)

Q109 Awareness of other OHA staff or units who use information from same deliverable?

Responses: 3 out of 4

- Yes: 1
- No: 2

Q110 Awareness of other Contract deliverables that ask for the same or similar information?

Responses: 2 out of 4

- Yes: 0
- No: 2

Q111 OHA Staff Involvement – Responses: 4 out of 4

Please tell us about how much time it takes to review the deliverable(s) you evaluate or coordinate.

I am lead for this deliverable	Total staff time required per CCO				
	< 30 minutes	0.5-2 hours	3-5 hours	6-10 hours	11+ hours
1 (25% of Q111 responses)	0 (0% of Q111 responses)	1 (25% of Q111 responses)	1 (25% of Q111 responses)	0 (0% of Q111 responses)	1 (25% of Q111 responses)

Deliverable 25: Personal Injury Liens (PIL) Policies and Procedures [Ex. B, Part 8, Sec. 18, Para. C

How many CCO staff members chose this deliverable? 11

Q5 Staff Involvement – Responses: 8 out of 11

I am lead for this deliverable	Requires help from other staff	Less than 5 total staff hours required	5 – 10 total staff hours required	10-15 total staff hours required	15+ total staff hours required
5 (62.50% of Q5 responses)	6 (75% of Q5 responses)	2 (25% of Q5 responses)	1 (12.50% of Q5 responses)	3 (37.50% of Q5 responses)	1 (12.50% of Q5 responses)

Q6 Issues – Responses: 5 out of 11

We DO NOT use the information for internal operations	The submission does not change year over year	Another deliverable asks for same info	Deliverable has inconvenient due date	Too many submissions required per year
0 (0% of Q6 responses)	3 (60% of Q6 responses)	0 (0% of Q6 responses)	3 (60% of Q6 responses)	0 (0% of Q6 responses)

Q8 Satisfaction 1 to 5 stars: 5 stars

Responses: 1 out of 11

Q9 How should OHA change this deliverable?

Responses: 3 out of 11

- Don't change deliverable: 1
- Change from scheduled to ad hoc: 2

Q10: What other feedback do you have about improving this deliverable?

Responses: 0 out of 11

Deliverable 26: Lien Release and Lien Filing Templates [Ex. B, Part 8, Sec. 18, Paras. m-n]

How many CCO staff members chose this deliverable? 9

Q5 Staff Involvement – Responses: 6 out of 9

I am lead for this deliverable	Requires help from other staff	Less than 5 total staff hours required	5 – 10 total staff hours required	10-15 total staff hours required	15+ total staff hours required
4 (66.67% of Q5 responses)	4 (66.67% of Q5 responses)	0 (0% of Q5 responses)	2 (33.33% of Q5 responses)	3 (50% of Q5 responses)	1 (16.67% of Q5 responses)

Q6 Issues – Responses: 4 out of 9

We DO NOT use the information for internal operations	The submission does not change year over year	Another deliverable asks for same info	Deliverable has inconvenient due date	Too many submissions required per year
0 (0% of Q6 responses)	2 (50% of Q6 responses)	0 (0% of Q6 responses)	3 (75% of Q6 responses)	0 (0% of Q6 responses)

Q8 Satisfaction 1 to 5 stars: 5 stars

Responses: 1 out of 9

Q9 How should OHA change this deliverable?

Responses: 2 out of 9

- Don't change the deliverable: 1
- Change from scheduled to ad hoc: 1

Q10: What other feedback do you have about improving this deliverable?

Responses: 0 out of 9

Deliverable 27: Change in Controlling interest [Ex. B, Part 8, Sec. 21, Para. A]

How many CCO staff members chose this deliverable? 5

Q5 Staff Involvement – Responses: 4 out of 5

I am lead for this deliverable	Requires help from other staff	Less than 5 total staff hours required	5 – 10 total staff hours required	10-15 total staff hours required	15+ total staff hours required
1 (25% of Q5 responses)	3 (75% of Q5 responses)	2 (50% of Q5 responses)	1 (25% of Q5 responses)	1 (25% of Q5 responses)	0 (0% of Q5 responses)

Q6 Issues – Responses: 3 out of 5

We DO NOT use the information for internal operations	The submission does not change year over year	Another deliverable asks for same info	Deliverable has inconvenient due date	Too many submissions required per year
0 (0% of Q6 responses)	2 (66.67% of Q6 responses)	0 (0% of Q6 responses)	1 (33.33% of Q6 responses)	0 (0% of Q6 responses)

Q8 Satisfaction 1 to 5 stars: **5 stars**

Responses: 1 out of 5

Q9 How should OHA change this deliverable?

Responses: 1 out of 5

- Change from scheduled to ad hoc: 1

Q10: What other feedback do you have about improving this deliverable?

Responses: 0 out of 5

Deliverable 28: Crossover claims for affiliated MA and DSN Plans [Ex. B, Part 8, Sec. 6, Para. d]

How many CCO staff members chose this deliverable? 7

Q5 Staff Involvement – Responses: 5 out of 7

I am lead for this deliverable	Requires help from other staff	Less than 5 total staff hours required	5 – 10 total staff hours required	10-15 total staff hours required	15+ total staff hours required
3 (60% of Q5 responses)	3 (60% of Q5 responses)	2 (40% of Q5 responses)	0 (0% of Q5 responses)	1 (20% of Q5 responses)	2 (40% of Q5 responses)

Q6 Issues – Responses: 4 out of 7

We DO NOT use the information for internal operations	The submission does not change year over year	Another deliverable asks for same info	Deliverable has inconvenient due date	Too many submissions required per year
2 (50% of Q6 responses)	3 (75% of Q6 responses)	0 (0% of Q6 responses)	1 (25% of Q6 responses)	0 (0% of Q6 responses)

Q8 Satisfaction 1 to 5 stars: 0 stars

Responses: 0 out of 7

Q9 How should OHA change this deliverable?

Responses: 0 out of 7

Q10: What other feedback do you have about improving this deliverable?

Responses: 0 out of 7

Deliverable 29: Affiliated Medicare Advantage Report & updated agreements or contracts [Ex. B, Part 8, Sec. 6, Para. i]

How many CCO staff members chose this deliverable? 15

Q5 Staff Involvement – Responses: 13 out of 15

I am lead for this deliverable	Requires help from other staff	Less than 5 total staff hours required	5 – 10 total staff hours required	10-15 total staff hours required	15+ total staff hours required
3 (23.08% of Q5 responses)	12 (92.31% of Q5 responses)	2 (15.38% of Q5 responses)	3 (23.08% of Q5 responses)	2 (15.38% of Q5 responses)	5 (38.46% of Q5 responses)

Q6 Issues – Responses: 4 out of 15

We DO NOT use the information for internal operations	The submission does not change year over year	Another deliverable asks for same info	Deliverable has inconvenient due date	Too many submissions required per year
2 (50% of Q6 responses)	3 (75% of Q6 responses)	0 (0% of Q6 responses)	1 (25% of Q6 responses)	0 (0% of Q6 responses)

Q8 Satisfaction 1 to 5 stars: 3 stars

Responses: 1 out of 15

Q9 How should OHA change this deliverable?

Responses: 0 out of 15

Q10: What other feedback do you have about improving this deliverable?

Responses: 1 out of 15

- This report seems like it may be stagnant, but it is helpful in ensuring CCOs are goal-setting with MA affiliates.

Deliverable 29: Continued from previous page

How many OHA staff chose this deliverable? 2

Q107 Primary purpose for deliverable submission to OHA – Responses: 1 out of 2

Document compliance	Share plans / future activities	Report performance for monitoring	Progress report for projects / programs	Inclusion in state / federal reporting	Identify designee / contacts
0 (0% of Q107 responses)	0 (0% of Q107 responses)	0 (0% of Q107 responses)	0 (0% of Q107 responses)	1 (100% of Q107 responses)	0 (0% of Q107 responses)

Q108 How submission information is used by OHA – Responses: 1 out of 2

Acknowledge receipt only	Evaluate / return results (Includes attestations)	Internal reporting	External reporting
0 (0% of Q108 responses)	1 (100% of Q108 responses)	1 (100% of Q108 responses)	1 (100% of Q108 responses)

Q109 Awareness of other OHA staff or units who use information from same deliverable?

Responses: 1 out of 2

- Yes: 1
- No: 0

Q110 Awareness of other Contract deliverables that ask for the same or similar information?

Responses: 1 out of 2

- Yes: 0
- No: 1

Q111 OHA Staff Involvement – Responses: 1 out of 2

Please tell us about how much time it takes to review the deliverable(s) you evaluate or coordinate.

I am lead for this deliverable	Total staff time required per CCO				
	< 30 minutes	0.5-2 hours	3-5 hours	6-10 hours	11+ hours
0 (0% of Q111 responses)	0 (0% of Q111 responses)	0 (0% of Q111 responses)	0 (0% of Q111 responses)	1 (0% of Q111 responses)	0 (0% of Q111 responses)

Deliverable 30: Fraud, Waste and Abuse (FWA) Prevention Handbook [Ex. B, Part 9, Sec. 13, Para. a.]

How many CCO staff members chose this deliverable? 18

Q5 Staff Involvement – Responses: 16 out of 18

I am lead for this deliverable	Requires help from other staff	Less than 5 total staff hours required	5 – 10 total staff hours required	10-15 total staff hours required	15+ total staff hours required
6 (37.50% of Q5 responses)	7 (43.75% of Q5 responses)	1 (6.25% of Q5 responses)	1 (6.25% of Q5 responses)	2 (12.50% of Q5 responses)	11 (68.75% of Q5 responses)

Q6 Issues – Responses: 13 out of 18

We DO NOT use the information for internal operations	The submission does not change year over year	Another deliverable asks for same info	Deliverable has inconvenient due date	Too many submissions required per year
1 (7.69% of Q6 responses)	6 (46.15% of Q6 responses)	4 (30.77% of Q6 responses)	6 (46.15% of Q6 responses)	1 (7.69% of Q6 responses)

Q8 Satisfaction 1 to 5 stars: 1.75 stars

Responses: 4 out of 18

Q9 How should OHA change this deliverable?

Responses: 4 out of 18

- Change the format: 2
- Remove deliverable: 1
- Attestation only: 1

Q10: What other feedback do you have about improving this deliverable?

Responses: 3 out of 18

- It is my understanding that no CCO has had their FWA Handbooks, Prevention Plans or Assessment approved. I have talked to people at 4 or 5 CCO's and their materials have not been approved. If that is truly the case, then it tells me the directions, the expectations and the requirements have not been clearly communicated to the CCO's. Our plan met with HSAG to discuss the 2023 submissions and I lost track of how many times HSAG said "I think what OHA is looking for..." or "I think what they want you to show is...." The reviews are inconsistent also. We had sections of the Workbook and Plan approved in 2021 and found non-compliant in 2022 when the contract language did not change and our submissions were exactly the same, only updated documents such as member handbooks or policies. CCO's spent a lot of time working on these knowing we were not going to pass.
- Recommend allowing for attestation if there has been no material changes to a CCO's process once approved by OHA. One concern with having to wait for OHA's approval before dissemination to staff and providers/subcontractors on any revisions made based off CCO Contract changes and any regulatory changes, if any, is the turnaround time from submission to receiving a response back, it is often mid year before a response is received and the updated documentation is then sent out mid year, however if any corrections are necessary it postpones delivery even further placing the CCO out of compliance. Also, there are many deliverables due January 30/31 of the contract year. The Compliance Department assists in any of the CCO deliverable reviews prior to submission and having many deliverables due within the same period creates a hardship to assist with all deliverable reviews prior to their submission

Deliverable 31: FWA Prevention Plan [Ex. B, Part 9, Sec. 13, Para. a.]

How many CCO staff members chose this deliverable? 16

Q5 Staff Involvement – Responses: 15 out of 16

I am lead for this deliverable	Requires help from other staff	Less than 5 total staff hours required	5 – 10 total staff hours required	10-15 total staff hours required	15+ total staff hours required
5 (33.33% of Q5 responses)	6 (40% of Q5 responses)	0 (0% of Q5 responses)	0 (0% of Q5 responses)	3 (20% of Q5 responses)	11 (73.33% of Q5 responses)

Q6 Issues – Responses: 11 out of 16

We DO NOT use the information for internal operations	The submission does not change year over year	Another deliverable asks for same info	Deliverable has inconvenient due date	Too many submissions required per year
0 (0% of Q6 responses)	2 (18.18% of Q6 responses)	4 (36.36% of Q6 responses)	7 (63.64% of Q6 responses)	0 (0% of Q6 responses)

Q8 Satisfaction 1 to 5 stars: 0 stars

Responses: 0 out of 16

Q9 How should OHA change this deliverable?

Responses: 1 out of 16

- Change from scheduled to ad hoc: 1

Q10: What other feedback do you have about improving this deliverable?

Responses: 1 out of 16

- Helpful to have feedback within enough time to make changes in the current year. Receiving feedback in November doesn't allow for any changes and ensures the next year's submission will also have findings.

Deliverable 32: FWA Audit Report - Quarterly or Annual [Ex. B, Part 9, Sec. 17, Para. b]

How many CCO staff members chose this deliverable? 22

Q5 Staff Involvement – Responses: 21 out of 22

I am lead for this deliverable	Requires help from other staff	Less than 5 total staff hours required	5 – 10 total staff hours required	10-15 total staff hours required	15+ total staff hours required
7 (33.33% of Q5 responses)	11 (52.38% of Q5 responses)	5 (23.81% of Q5 responses)	3 (14.29% of Q5 responses)	5 (23.81% of Q5 responses)	6 (28.57% of Q5 responses)

Q6 Issues – Responses: 12 out of 22

We DO NOT use the information for internal operations	The submission does not change year over year	Another deliverable asks for same info	Deliverable has inconvenient due date	Too many submissions required per year
3 (25% of Q6 responses)	0 (0% of Q6 responses)	4 (33.33% of Q6 responses)	7 (58.33% of Q6 responses)	6 (50% of Q6 responses)

Q8 Satisfaction 1 to 5 stars: 1.43 stars

Responses: 5 out of 22

Q9 How should OHA change this deliverable?

Responses: 6 out of 22

- Attestation only: 1
- Change the format: 3
- Combine with another deliverable: 2
 - Combine with Referrals and Investigation report

Q10: What other feedback do you have about improving this deliverable?

Responses: 6 out of 22

- It would be helpful if a macro was in place to forward cases or audits that will flow to the next quarter.
- The directions and guidance for this deliverable changes annually and it also seems that the criteria for reviewing whether compliant or not changes annually.
- Make the report useful for the work intended to be reported. The Document only identifies one kind of reporting (FWA cases) where the contract identifies three kinds of reports (FWA, PI Audits & Overpayments) that need to go in the document. Combining and automating the data with the FWA referrals and Investigations report would be a time saver. Training to the CCOs and a better Data Dictionary on the document would be good as well. Happy to collaborate to make this a useful document for all.
- We are required to do four quarterly reports and then one annual report, which is just a combination of the 4 quarterly reports wrapped up into one annual report. Also, there is no feedback on the quarterly report but we find out on the annual report there are issues and we need to resubmit. OHA should be able to plug in the data from the quarterly reports into a template to populate the annual report.
- There have been multiple requests for technical assistance on this deliverable. Email responses as well as phone calls a majority of the time have not resulted in helpful guidance to ensure completion of the FWA report accurately. Guidance will be taken and implemented into the report however further feedback will be provided that how data is presented is incorrect. Feedback also requests documentation that is not a CCO Contract requirement pertaining to referrals made that are not PI audits, the contract does not case investigations should be included with the FWA report for those cases

where a PI audit was not conducted. There is a concern is the IRR of these reviews as inconsistent feedback is provided with what has been discussed.

- A thorough FAQ needs to be developed as there are always questions on items that do not fit every scenario. Additionally, there are a lot of debate on what constitutes an audit vs investigations. CCOs have repeatedly asked OPI to have a more collaborative relationship regarding this deliverable and FWA as a whole, but there has been little to no engagement, and no willingness to take in feedback.

How many OHA staff chose this deliverable? 1

Q107 Primary purpose for deliverable submission to OHA – Responses: 1 out of 1

Document compliance	Share plans / future activities	Report performance for monitoring	Progress report for projects / programs	Inclusion in state / federal reporting	Identify designee / contacts
0 (0% of Q107 responses)	0 (0% of Q107 responses)	0 (0% of Q107 responses)	0 (0% of Q107 responses)	1 (100% of Q107 responses)	0 (0% of Q107 responses)

Q108 How submission information is used by OHA – Responses: 1 out of 1

Acknowledge receipt only	Evaluate / return results (Includes attestations)	Internal reporting	External reporting
0 (0% of Q108 responses)	1 (100% of Q108 responses)	1 (100% of Q108 responses)	1 (100% of Q108 responses)

Q109 Awareness of other OHA staff or units who use information from same deliverable?

Responses: 1 out of 1

- Yes: 0
- No: 1

Q110 Awareness of other Contract deliverables that ask for the same or similar information?

Responses: 1 out of 1

- Yes: 0
- No: 1

Q111 OHA Staff Involvement – Responses: 1 out of 1

Please tell us about how much time it takes to review the deliverable(s) you evaluate or coordinate.

I am lead for this deliverable	Total staff time required per CCO				
	< 30 minutes	0.5-2 hours	3-5 hours	6-10 hours	11+ hours
0 (0% of Q111 responses)	0 (0% of Q111 responses)	0 (0% of Q111 responses)	0 (0% of Q111 responses)	0 (0% of Q111 responses)	1 (100% of Q111 responses)

Deliverable 33: FWA Referrals and Investigations Report - Quarterly or Annual [Ex. B, Part 9, Sec. 17, Para. c]

How many CCO staff members chose this deliverable? 18

Q5 Staff Involvement – Responses: 17 out of 18

I am lead for this deliverable	Requires help from other staff	Less than 5 total staff hours required	5 – 10 total staff hours required	10-15 total staff hours required	15+ total staff hours required
6 (35.29% of Q5 responses)	9 (52.94% of Q5 responses)	2 (11.76% of Q5 responses)	3 (17.65% of Q5 responses)	5 (29.41% of Q5 responses)	4 (23.53% of Q5 responses)

Q6 Issues – Responses: 12 out of 18

We DO NOT use the information for internal operations	The submission does not change year over year	Another deliverable asks for same info	Deliverable has inconvenient due date	Too many submissions required per year
2 (16.67% of Q6 responses)	0 (0% of Q6 responses)	5 (41.67% of Q6 responses)	4 (33.33% of Q6 responses)	8 (66.67% of Q6 responses)

Q8 Satisfaction 1 to 5 stars: 1.33 stars

Responses: 4 out of 18

Q9 How should OHA change this deliverable?

Responses: 6 out of 18

- Remove deliverable: 2
- Combine with another deliverable: 4
 - FWA Audit Report
 - Other FWA deliverables

Q10: What other feedback do you have about improving this deliverable?

Responses: 3 out of 18

- Having the FWA deliverables all due within 24hrs of each other but yet separated out so they're individual makes it very difficult to track. The naming conventions are similar, the deliverables require the same reports to be submitted on some of them, and it is very cumbersome. If there is a way to combine deliverables to not reinvent the wheel and duplicate work it would make the process much easier.
- What value is coming from this document being separate that could not easily be added to the FWA Audit Document. If not make it a rolling document for the worksheets, the document is static and rolling simultaneously.
- We are required to do four quarterly reports and then one annual report, which is just a combination of the 4 quarterly reports wrapped up into one annual report. Also, there is no feedback on the quarterly report but we find out on the annual report there are issues and we need to resubmit. OHA should be able to plug in the data from the quarterly reports into a template to populate the annual report.
- The review of this document was very disturbing. Our deliverable was scored worse and in a different way than last year. There was also what looked to be too 'picky' - non-compliant for using TBD (to be determined); the reviewer wanted the term 'in process'. This is counter-productive. Other

areas - we referred 5 OHP members to the MCFU - we were non-compliant because we did not conduct an investigation. CCOs do not determine eligibility - all the information we had was submitted. Again, duplicative and in my opinion we were compliant.

- A thorough FAQ needs to be developed as there are always questions on items that do not fit every scenario. Additionally, there are a lot of debate on what constitutes an audit vs investigations. CCOs have repeatedly asked OPI to have a more collaborative relationship regarding this deliverable and FWA as a whole, but there has been little to no engagement, and no willingness to take in feedback.

How many OHA staff chose this deliverable? 2

Q107 Primary purpose for deliverable submission to OHA – Responses: 2 out of 2

Document compliance	Share plans / future activities	Report performance for monitoring	Progress report for projects / programs	Inclusion in state / federal reporting	Identify designee / contacts
0 (0% of Q107 responses)	1 (50% of Q107 responses)	0 (0% of Q107 responses)	0 (0% of Q107 responses)	1 (50% of Q107 responses)	0 (0% of Q107 responses)

Q108 How submission information is used by OHA – Responses: 2 out of 2

Acknowledge receipt only	Evaluate / return results (Includes attestations)	Internal reporting	External reporting
0 (0% of Q108 responses)	2 (100% of Q108 responses)	2 (100% of Q108 responses)	1 (50% of Q108 responses)

Q109 Awareness of other OHA staff or units who use information from same deliverable?

Responses: 2 out of 2

- Yes: 1
- No: 1

Q110 Awareness of other Contract deliverables that ask for the same or similar information?

Responses: 2 out of 2

- Yes: 0
- No: 2

Q111 OHA Staff Involvement – Responses: 1 out of 2

Please tell us about how much time it takes to review the deliverable(s) you evaluate or coordinate.

I am lead for this deliverable	Total staff time required per CCO				
	< 30 minutes	0.5-2 hours	3-5 hours	6-10 hours	11+ hours
0 (0% of Q111 responses)	0 (0% of Q111 responses)	0 (0% of Q111 responses)	0 (0% of Q111 responses)	0 (0% of Q111 responses)	1 (0% of Q111 responses)

Deliverable 34: FWA Assessment Report [Ex. B, Part 9, Sec. 18, Para. C]

How many CCO staff members chose this deliverable? 17

Q5 Staff Involvement – Responses: 16 out of 17

I am lead for this deliverable	Requires help from other staff	Less than 5 total staff hours required	5 – 10 total staff hours required	10-15 total staff hours required	15+ total staff hours required
7 (43.75% of Q5 responses)	7 (43.75% of Q5 responses)	0 (0% of Q5 responses)	0 (0% of Q5 responses)	2 (12.50% of Q5 responses)	13 (81.25% of Q5 responses)

Q6 Issues – Responses: 12 out of 17

We DO NOT use the information for internal operations	The submission does not change year over year	Another deliverable asks for same info	Deliverable has inconvenient due date	Too many submissions required per year
1 (8.33% of Q6 responses)	0 (0% of Q6 responses)	3 (25% of Q6 responses)	9 (75% of Q6 responses)	5 (41.67% of Q6 responses)

Q8 Satisfaction 1 to 5 stars: 2 stars

Responses: 2 out of 17

Q9 How should OHA change this deliverable?

Responses: 2 out of 17

- Combine with another deliverable: 1
 - The narrative section is very similar to things we write for the DSN, ICC Policies, TQS, LTSS MOU
- None of the above: 1

Q10: What other feedback do you have about improving this deliverable?

Responses: 2 out of 17

- More specificity on this would be nice. FAQ
- OHA has requested the FWA deliverables be submitted per line item. One difficulty with this request is that the FWA Deliverables Review Template, this combines 3 sections and are not separated out by OHA line item. Deliverables provided often support across the three review sections. Having to separate deliverables out into three separate submissions create duplication among the following deliverables: 1. FWA Prevention Policies and Procedures (FWA Prevention Handbook) 2. Annual FWA Assessment Report Recommendation would be to create a FWA Prevention deliverable that include all three elements versus 3 separate deliverables.

Deliverable 35: Transformation and Quality Strategy (TQS) [Ex. B, Part 10, Sec. 2, Para. b (1)]

How many CCO staff members chose this deliverable? 41

Q5 Staff Involvement – Responses: 39 out of 41

I am lead for this deliverable	Requires help from other staff	Less than 5 total staff hours required	5 – 10 total staff hours required	10-15 total staff hours required	15+ total staff hours required
9 (23.08% of Q5 responses)	30 (76.92% of Q5 responses)	1 (2.56% of Q5 responses)	0 (0% of Q5 responses)	2 (5.13% of Q5 responses)	37 (94.87% of Q5 responses)

Q6 Issues – Responses: 30 out of 41

We DO NOT use the information for internal operations	The submission does not change year over year	Another deliverable asks for same info	Deliverable has inconvenient due date	Too many submissions required per year
4 (13.33% of Q6 responses)	0 (0% of Q6 responses)	20 (66.67% of Q6 responses)	14 (46.67% of Q6 responses)	5 (16.67% of Q6 responses)

Q8 Satisfaction 1 to 5 stars: 2.1 stars

Responses: 12 out of 41

Q9 How should OHA change this deliverable?

Responses: 13 out of 41

- Change the format: 5
- Change from scheduled to ad hoc: 1
- Don't change the deliverable: 1
- Attestation only: 1
- Combine with another deliverable: 1
 - HEP, BH Plan and PIPs
- Remove the deliverable: 1
- None of the above: 3

Q10: What other feedback do you have about improving this deliverable?

Responses: 9 out of 41

- We recommend moving out the deliverable timeline due to competing due dates within quarter one including EQR review. While the REALD/SOGI data inclusion is of value it adds significant length, and doesn't always demonstrate meaningful insight into relevant health disparities and inequities. This is particularly true for more homogeneous rural service areas where health disparities are more aligned with rural disadvantage and social health complexity.
- The template is difficult to navigate. The addition of adding REAL-D and SOGI data overlaps with the Health Equity Plan elements.
- The TQS is awkwardly written and confusing to fill out. It takes numerous hours for staff across multiple departments to complete. Progress reports are equally challenging. The narrative questions are repeats of information provided in multiple other documents
- Very challenging to have to large deliverable on the same timeline. HIT and TQS. Also hard that they are all tapered right on top of each other. Then DSN, BH Parity and HE.
- The TQS is a combination of multiple projects that aim to improve focus areas outlined by OHA. The attachments to this (Mainly the addition of the QAPI as per HSAG's review) is extremely duplicative.

- We are already submitting PIPs that have similar goals. It would be nice for more alignment. We can pick some of our PIP topics, but maybe ensuring there are specific aspects we are including from the TQS projects.
- Too many required projects. Many projects have already been created out of internal quality initiatives but then have to be changed to a model that fits the collective versus internal operations and structure.
- The TQS was intended (and messaged to CCOs) to be the new QAPI requirement. In 2022 HSAG indicated that it did not fulfill QAPI requirements, so now many CCOs have both a TQS and QAPI. Would be better to have a single document with clear expectations that fulfilled all contractual requirements.
- It is due 03/15/2023; the QAPI is also due on this date. When it comes to any data that is dependent upon claims 'run out' - which is usually the first 90 days of the new contract year. It is very difficult to pull this together to reflect a quality product and doubt if the data is reflective of the final numbers.

Deliverable 35: Continued from previous page**How many OHA staff chose this deliverable? 6****Q107 Primary purpose for deliverable submission to OHA – Responses: 6 out of 6**

Document compliance	Share plans / future activities	Report performance for monitoring	Progress report for projects / programs	Inclusion in state / federal reporting	Identify designee / contacts
0 (0% of Q107 responses)	3 (50% of Q107 responses)	0 (0% of Q107 responses)	2 (33.33% of Q107 responses)	1 (16.67% of Q107 responses)	0 (0% of Q107 responses)

Q108 How submission information is used by OHA – Responses: 6 out of 6

Acknowledge receipt only	Evaluate / return results (Includes attestations)	Internal reporting	External reporting
0 (0% of Q108 responses)	6 (100% of Q108 responses)	4 (66.67% of Q108 responses)	2 (33.33% of Q108 responses)

Q109 Awareness of other OHA staff or units who use information from same deliverable?

Responses: 6 out of 6

- Yes: 6
- No: 0

Q110 Awareness of other Contract deliverables that ask for the same or similar information?

Responses: 6 out of 6

- Yes: 3
- No: 3

Q111 OHA Staff Involvement – Responses: 6 out of 6

Please tell us about how much time it takes to review the deliverable(s) you evaluate or coordinate.

I am lead for this deliverable	Total staff time required per CCO				
	< 30 minutes	0.5-2 hours	3-5 hours	6-10 hours	11+ hours
3 (50% of Q111 responses)	0 (0% of Q111 responses)	2 (33.33% of Q111 responses)	2 (33.33% of Q111 responses)	2 (33.33% of Q111 responses)	0 (0% of Q111 responses)

Deliverable 36: Quality Pool Distribution Plan [Ex. B, Part 10, Sec. 4, Para. e (2)]

How many CCO staff members chose this deliverable? 20

Q5 Staff Involvement – Responses: 19 out of 20

I am lead for this deliverable	Requires help from other staff	Less than 5 total staff hours required	5 – 10 total staff hours required	10-15 total staff hours required	15+ total staff hours required
6 (31.58% of Q5 responses)	12 (63.16% of Q5 responses)	3 (15.79% of Q5 responses)	4 (21.05% of Q5 responses)	6 (31.58% of Q5 responses)	5 (26.32% of Q5 responses)

Q6 Issues – Responses: 7 out of 20

We DO NOT use the information for internal operations	The submission does not change year over year	Another deliverable asks for same info	Deliverable has inconvenient due date	Too many submissions required per year
4 (57.14% of Q6 responses)	0 (0% of Q6 responses)	1 (14.29% of Q6 responses)	2 (28.57% of Q6 responses)	0 (0% of Q6 responses)

Q8 Satisfaction 1 to 5 stars: 2 stars

Responses: 3 out of 20

Q9 How should OHA change this deliverable?

Responses: 3 out of 20

- Change the format: 1
- Remove the deliverable: 2

Q10: What other feedback do you have about improving this deliverable?

Responses: 1 out of 20

- Please review the need for this report. Requested information may infringe on proprietary information, and requires CCO public postings of such info that could be perceived as anti-trust for provider reimbursement.

Deliverable 37: Quality Pool Participating Providers Report [Ex. B, Part 10, Sec. 5]

How many CCO staff members chose this deliverable? 12

Q5 Staff Involvement – Responses: 11 out of 12

I am lead for this deliverable	Requires help from other staff	Less than 5 total staff hours required	5 – 10 total staff hours required	10-15 total staff hours required	15+ total staff hours required
1 (9.09% of Q5 responses)	8 (72.73% of Q5 responses)	3 (27.27% of Q5 responses)	3 (27.27% of Q5 responses)	2 (18.18% of Q5 responses)	2 (18.18% of Q5 responses)

Q6 Issues – Responses: 6 out of 12

We DO NOT use the information for internal operations	The submission does not change year over year	Another deliverable asks for same info	Deliverable has inconvenient due date	Too many submissions required per year
2 (33.33% of Q6 responses)	0 (0% of Q6 responses)	2 (33.33% of Q6 responses)	2 (33.33% of Q6 responses)	0 (0% of Q6 responses)

Q8 Satisfaction 1 to 5 stars: 4 stars

Responses: 1 out of 12

Q9 How should OHA change this deliverable?

Responses: 2 out of 12

- Remove deliverable: 1
- None of the above: 1

Q10: What other feedback do you have about improving this deliverable?

Responses: 2 out of 12

- Variable timelines within the process should still be included in the OHA deliverables summary report that our Contract Administrator receives. These deliverables can be overlooked as they are not included in that report and staff changes can easily lead to a loss of institutional knowledge.
- I feel that the quality pool distribution plan is able to provide a sufficient summary of the intent to distribute quality pool funds.

Deliverable 38: Quarterly PIP Progress Reports [Ex. B, Part 10, Sec. 6, Para. E]

How many CCO staff members chose this deliverable? 22

Q5 Staff Involvement – Responses: 20 out of 22

I am lead for this deliverable	Requires help from other staff	Less than 5 total staff hours required	5 – 10 total staff hours required	10-15 total staff hours required	15+ total staff hours required
7 (35% of Q5 responses)	15 (75% of Q5 responses)	0 (0% of Q5 responses)	3 (15% of Q5 responses)	7 (35% of Q5 responses)	9 (45% of Q5 responses)

Q6 Issues – Responses: 13 out of 22

We DO NOT use the information for internal operations	The submission does not change year over year	Another deliverable asks for same info	Deliverable has inconvenient due date	Too many submissions required per year
3 (23.08% of Q6 responses)	1 (7.69% of Q6 responses)	7 (53.85% of Q6 responses)	2 (15.38% of Q6 responses)	8 (61.54% of Q6 responses)

Q8 Satisfaction 1 to 5 stars: 2 stars

Responses: 1 out of 22

Q9 How should OHA change this deliverable?

Responses: 1 out of 22

- Remove deliverable: 1

Q10: What other feedback do you have about improving this deliverable?

Responses: 1 out of 22

- Recommend keeping the statewide PIP but doing away with the CCO-specific reports. There is virtually no support for CCO-specific reports and have not received feedback on these update reports or our projects in the past three years. This feels like a check-the-box deliverable. Does OHA do anything with these reports? Attempts to collaborate between CCOs at QHOC have fell a little flat. Further, QHOC does not feel like the right space to discuss PIPs - wrong audience. Additionally, we have tried to align our PIPs with our TQS projects and it feels like there should just be one report and I'd recommend keeping TQS and doing away with the CCO-specific PIPs.

Deliverable 38: Continued from previous page

How many OHA staff chose this deliverable? 2

Q107 Primary purpose for deliverable submission to OHA – Responses: 1 out of 2

Document compliance	Share plans / future activities	Report performance for monitoring	Progress report for projects / programs	Inclusion in state / federal reporting	Identify designee / contacts
0 (0% of Q107 responses)	0 (0% of Q107 responses)	0 (0% of Q107 responses)	1 (100% of Q107 responses)	0 (0% of Q107 responses)	0 (0% of Q107 responses)

Q108 How submission information is used by OHA – Responses: 0 out of 2

Acknowledge receipt only	Evaluate / return results (Includes attestations)	Internal reporting	External reporting
1 (100% of Q108 responses)	0 (0% of Q108 responses)	0 (0% of Q108 responses)	1 (100% of Q108 responses)

Q109 Awareness of other OHA staff or units who use information from same deliverable?

Responses: 1 out of 2

- Yes: 0
- No: 1

Q110 Awareness of other Contract deliverables that ask for the same or similar information?

Responses: 1 out of 2

- Yes: 0
- No: 1

Q111 OHA Staff Involvement – Responses: 2 out of 2

Please tell us about how much time it takes to review the deliverable(s) you evaluate or coordinate.

I am lead for this deliverable	Total staff time required per CCO				
	< 30 minutes	0.5-2 hours	3-5 hours	6-10 hours	11+ hours
1 (50% of Q111 responses)	0 (0% of Q111 responses)	1 (50% of Q111 responses)	0 (0% of Q111 responses)	0 (0% of Q111 responses)	0 (0% of Q111 responses)

Deliverable 39: Behavioral Health Qualified Directed Payment (BH QDP) Attestation [Ex. C, Sec. 1, Para. d. (2)(g)]

How many CCO staff members chose this deliverable? 16

Q5 Staff Involvement – Responses: 14 out of 16

I am lead for this deliverable	Requires help from other staff	Less than 5 total staff hours required	5 – 10 total staff hours required	10-15 total staff hours required	15+ total staff hours required
4 (28.57% of Q5 responses)	8 (57.14% of Q5 responses)	1 (7.14% of Q5 responses)	2 (14.29% of Q5 responses)	2 (14.29% of Q5 responses)	7 (50% of Q5 responses)

Q6 Issues – Responses: 10 out of 16

We DO NOT use the information for internal operations	The submission does not change year over year	Another deliverable asks for same info	Deliverable has inconvenient due date	Too many submissions required per year
4 (40% of Q6 responses)	1 (10% of Q6 responses)	2 (20% of Q6 responses)	0 (0% of Q6 responses)	3 (30% of Q6 responses)

Q8 Satisfaction 1 to 5 stars: 1 star

Responses: 1 out of 16

Q9 How should OHA change this deliverable?

Responses: 1 out of 16

- Change the format: 1

Q10: What other feedback do you have about improving this deliverable?

Responses: 1 out of 16

- Much of this information is sourced from or needed from OHA to complete. CCO and providers are duplicating efforts and take on significant communications to source information. This process is very manual to complete.

Deliverable 40: BH QDPs Provider webpage URL [Ex. C, Sec. 1, Para. d. (2)(h)]

How many CCO staff members chose this deliverable? 12

Q5 Staff Involvement – Responses: 10 out of 12

I am lead for this deliverable	Requires help from other staff	Less than 5 total staff hours required	5 – 10 total staff hours required	10-15 total staff hours required	15+ total staff hours required
1 (10% of Q5 responses)	5 (50% of Q5 responses)	4 (40% of Q5 responses)	1 (10% of Q5 responses)	2 (20% of Q5 responses)	3 (30% of Q5 responses)

Q6 Issues – Responses: 5 out of 12

We DO NOT use the information for internal operations	The submission does not change year over year	Another deliverable asks for same info	Deliverable has inconvenient due date	Too many submissions required per year
0 (0% of Q6 responses)	1 (20% of Q6 responses)	2 (40% of Q6 responses)	1 (20% of Q6 responses)	1 (20% of Q6 responses)

Q8 Satisfaction 1 to 5 stars: 0 stars

Responses: 0 out of 12

Q9 How should OHA change this deliverable?

Responses: 0 out of 12

Q10: What other feedback do you have about improving this deliverable?

Responses: 0 out of 12

Deliverable 41: Delivery System Network (DSN) Provider Capacity Report - Annual or Quarterly [Ex. G, Sec. 2, Para. A]

How many CCO staff members chose this deliverable? 26

Q5 Staff Involvement – Responses: 24 out of 26

I am lead for this deliverable	Requires help from other staff	Less than 5 total staff hours required	5 – 10 total staff hours required	10-15 total staff hours required	15+ total staff hours required
8 (33.33% of Q5 responses)	18 (75% of Q5 responses)	0 (0% of Q5 responses)	0 (0% of Q5 responses)	4 (16.67% of Q5 responses)	19 (79.17% of Q5 responses)

Q6 Issues – Responses: 17 out of 26

We DO NOT use the information for internal operations	The submission does not change year over year	Another deliverable asks for same info	Deliverable has inconvenient due date	Too many submissions required per year
5 (29.41% of Q6 responses)	2 (11.76% of Q6 responses)	7 (41.18% of Q6 responses)	5 (29.41% of Q6 responses)	10 (58.82% of Q6 responses)

Q8 Satisfaction 1 to 5 stars: 2.25 stars

Responses: 5 out of 26

Q9 How should OHA change this deliverable?

Responses: 5 out of 26

- Don't change the deliverable: 1
- None of the above: 4

Q10: What other feedback do you have about improving this deliverable?

Responses: 5 out of 26

- Regarding the DSN Capacity Reports, each time OHA changes the report template, it creates a significant administrative cost for our CCO, even when the changes appear minor. We have appreciated the opportunities that OHA has offered for CCOs to provide feedback on the proposed changes to the report template but have still found some of the changes introduce new barriers and inefficiencies. For example, the shift from SERVCAT to taxonomy code has made it much more difficult for our CCO to use these reports for internal operations. To improve this deliverable, we would appreciate ongoing collaboration to determine how to make these reports useful for both OHA and CCOs, as well as having a consistent template from OHA that does not change regularly. We recognize changes may be needed from time to time, but if changes are needed, having them batched so that they can be planned for and happen all at once instead of over multiple iterations would be preferred. Regarding the DSN Narrative Report, this deliverable's template also changes from year to year, which then means that staff and providers are required to rewrite the full report annually. Given that the changes to a CCO's network year-over-year are typically minor, we would appreciate the opportunity to 1) Only reflect on any consequential changes to the network (preferred) or 2) Have the template stay consistent so the effort now spent on this time-consuming deliverable can be redeployed to more transformative opportunities. If this Narrative Report continues to require the same amount of effort from across our network, we would also appreciate a timeline that accounts for summer holidays. A mid-spring or mid-fall deadline would be

preferable so that staff do not have to cut short or postpone well-earned time off during gorgeous Oregon summers.

- Each time OHA changes the DSN Capacity Report template, it creates a significant administrative cost for our CCO, even when the changes appear minor to OHA. We have appreciated the opportunities that OHA has offered for CCOs to provide feedback on the proposed changes but would ask that changes to the template be batched and, ideally, infrequent.
- No more than twice a year, preferably just one time - the annual report. The annual report requires much more information with a shorter deliverable date after the quarter end. The quarterly reports have 45 days and the annual only has 30 days.
- Changes to deliverable expectations, templates, and reported data elements are being proposed without the understanding of lead time and downstream system impacts as a result of the change.
- Network adequacy and delivery system capacity are incredibly important for our members and a key part of our work. This report, particularly the narrative report, takes a huge amount of time to complete every year. Dozens and dozens of hours writing and compiling information across most teams within the CCO. We suspect this is true across CCOs. It is unclear how much value the report itself adds to either the CCO or OHA and to the actual capacity of the network, though we agree the underlying work is incredibly important.

Deliverable 41: Continued from previous page

How many OHA staff chose this deliverable? 2

Q107 Primary purpose for deliverable submission to OHA – Responses: 2 out of 2

Document compliance	Share plans / future activities	Report performance for monitoring	Progress report for projects / programs	Inclusion in state / federal reporting	Identify designee / contacts
0 (0% of Q107 responses)	0 (0% of Q107 responses)	2 (100% of Q107 responses)	0 (0% of Q107 responses)	0 (0% of Q107 responses)	0 (0% of Q107 responses)

Q108 How submission information is used by OHA – Responses: 2 out of 2

Acknowledge receipt only	Evaluate / return results (Includes attestations)	Internal reporting	External reporting
0 (0% of Q108 responses)	2 (100% of Q108 responses)	2 (100% of Q108 responses)	1 (50% of Q108 responses)

Q109 Awareness of other OHA staff or units who use information from same deliverable?

Responses: 2 out of 2

- Yes: 2
- No: 0

Q110 Awareness of other Contract deliverables that ask for the same or similar information?

Responses: 2 out of 2

- Yes: 0
- No: 2

Q111 OHA Staff Involvement – Responses: 2 out of 2

Please tell us about how much time it takes to review the deliverable(s) you evaluate or coordinate.

I am lead for this deliverable	Total staff time required per CCO				
	< 30 minutes	0.5-2 hours	3-5 hours	6-10 hours	11+ hours
1 (50% of Q111 responses)	0 (0% of Q111 responses)	1 (50% of Q111 responses)	0 (0% of Q111 responses)	0 (0% of Q111 responses)	1 (50% of Q111 responses)

Deliverable 42: Value-Based Payment (VBP) Designee [Ex. H, Sec. 5]

How many CCO staff members chose this deliverable? 14

Q5 Staff Involvement – Responses: 13 out of 14

I am lead for this deliverable	Requires help from other staff	Less than 5 total staff hours required	5 – 10 total staff hours required	10-15 total staff hours required	15+ total staff hours required
4 (30.77% of Q5 responses)	7 (53.85% of Q5 responses)	5 (38.46% of Q5 responses)	2 (15.38% of Q5 responses)	1 (7.69% of Q5 responses)	4 (30.77% of Q5 responses)

Q6 Issues – Responses: 7 out of 14

We DO NOT use the information for internal operations	The submission does not change year over year	Another deliverable asks for same info	Deliverable has inconvenient due date	Too many submissions required per year
3 (42.86% of Q6 responses)	4 (57.14% of Q6 responses)	1 (14.29% of Q6 responses)	1 (14.29% of Q6 responses)	0 (0% of Q6 responses)

Q8 Satisfaction 1 to 5 stars: 1.5 stars

Responses: 2 out of 14

Q9 How should OHA change this deliverable?

Responses: 2 out of 14

- Change from scheduled to ad hoc: 2

Q10: What other feedback do you have about improving this deliverable?

Responses: 0 out of 14

Deliverable 42: Continued from previous page

How many OHA staff chose this deliverable? 1

Q107 Primary purpose for deliverable submission to OHA – Responses: 1 out of 1

Document compliance	Share plans / future activities	Report performance for monitoring	Progress report for projects / programs	Inclusion in state / federal reporting	Identify designee / contacts
0 (0% of Q107 responses)	0 (0% of Q107 responses)	0 (0% of Q107 responses)	0 (0% of Q107 responses)	0 (0% of Q107 responses)	1 (100% of Q107 responses)

Q108 How submission information is used by OHA – Responses: 1 out of 1

Acknowledge receipt only	Evaluate / return results (Includes attestations)	Internal reporting	External reporting
1 (0% of Q108 responses)	0 (0% of Q108 responses)	0 (0% of Q108 responses)	0 (0% of Q108 responses)

Q109 Awareness of other OHA staff or units who use information from same deliverable?

Responses: 1 out of 1

- Yes: 1
- No: 0

Q110 Awareness of other Contract deliverables that ask for the same or similar information?

Responses: 1 out of 1

- Yes: 0
- No: 1

Q111 OHA Staff Involvement – Responses: 1 out of 1

Please tell us about how much time it takes to review the deliverable(s) you evaluate or coordinate.

I am lead for this deliverable	Total staff time required per CCO				
	< 30 minutes	0.5-2 hours	3-5 hours	6-10 hours	11+ hours
0 (0% of Q111 responses)	1 (100% of Q111 responses)	0 (0% of Q111 responses)	0 (0% of Q111 responses)	0 (0% of Q111 responses)	0 (0% of Q111 responses)

Deliverable 43: PCPCH VBP Data and Care Delivery Area VBP Data template [Ex. H, Sec. 6, Para. A]

How many CCO staff members chose this deliverable? 12

Q5 Staff Involvement – Responses: 11 out of 12

I am lead for this deliverable	Requires help from other staff	Less than 5 total staff hours required	5 – 10 total staff hours required	10-15 total staff hours required	15+ total staff hours required
3 (27.27% of Q5 responses)	5 (45.45% of Q5 responses)	0 (0% of Q5 responses)	3 (27.27% of Q5 responses)	2 (18.18% of Q5 responses)	6 (54.55% of Q5 responses)

Q6 Issues – Responses: 7 out of 12

We DO NOT use the information for internal operations	The submission does not change year over year	Another deliverable asks for same info	Deliverable has inconvenient due date	Too many submissions required per year
3 (42.86% of Q6 responses)	3 (42.86% of Q6 responses)	2 (28.57% of Q6 responses)	1 (14.29% of Q6 responses)	2 (28.57% of Q6 responses)

Q8 Satisfaction 1 to 5 stars: 3 stars

Responses: 1 out of 12

Q9 How should OHA change this deliverable?

Responses: 1 out of 12

- Combine with another deliverable: 1
 - VBP Interview Questionnaire, Exhibit L16, APAC Payment Arrangement File

Q10: What other feedback do you have about improving this deliverable?

Responses: 1 out of 12

- Review for need and duplication, as well as increasing scope equates to increased reporting burden/time. Greater overlap and duplication of details with the VBP questionnaire, L16 and APAC reporting.

Deliverable 43: Continued from previous page

How many OHA staff chose this deliverable? 1

Q107 Primary purpose for deliverable submission to OHA – Responses: 1 out of 1

Document compliance	Share plans / future activities	Report performance for monitoring	Progress report for projects / programs	Inclusion in state / federal reporting	Identify designee / contacts
0 (0% of Q107 responses)	0 (0% of Q107 responses)	1 (100% of Q107 responses)	0 (0% of Q107 responses)	0 (0% of Q107 responses)	0 (0% of Q107 responses)

Q108 How submission information is used by OHA – Responses: 1 out of 1

Acknowledge receipt only	Evaluate / return results (Includes attestations)	Internal reporting	External reporting
0 (0% of Q108 responses)	1 (100% of Q108 responses)	0 (0% of Q108 responses)	0 (0% of Q108 responses)

Q109 Awareness of other OHA staff or units who use information from same deliverable?

Responses: 1 out of 1

- Yes: 1
- No: 0

Q110 Awareness of other Contract deliverables that ask for the same or similar information?

Responses: 1 out of 1

- Yes: 0
- No: 1

Q111 OHA Staff Involvement – Responses: 1 out of 1

Please tell us about how much time it takes to review the deliverable(s) you evaluate or coordinate.

I am lead for this deliverable	Total staff time required per CCO				
	< 30 minutes	0.5-2 hours	3-5 hours	6-10 hours	11+ hours
0 (0% of Q111 responses)	0 (0% of Q111 responses)	0 (0% of Q111 responses)	1 (100% of Q111 responses)	0 (0% of Q111 responses)	0 (0% of Q111 responses)

Deliverable 44: VBP Interview Questionnaire [Ex. H, Sec. 6, Para. B]

How many CCO staff members chose this deliverable? 15

Q5 Staff Involvement – Responses: 14 out of 15

I am lead for this deliverable	Requires help from other staff	Less than 5 total staff hours required	5 – 10 total staff hours required	10-15 total staff hours required	15+ total staff hours required
2 (14.29% of Q5 responses)	10 (71.43% of Q5 responses)	1 (7.14% of Q5 responses)	3 (21.43% of Q5 responses)	3 (21.43% of Q5 responses)	7 (50% of Q5 responses)

Q6 Issues – Responses: 7 out of 15

We DO NOT use the information for internal operations	The submission does not change year over year	Another deliverable asks for same info	Deliverable has inconvenient due date	Too many submissions required per year
4 (57.14% of Q6 responses)	1 (14.29% of Q6 responses)	3 (42.86% of Q6 responses)	2 (28.57% of Q6 responses)	0 (0% of Q6 responses)

Q8 Satisfaction 1 to 5 stars: 2 stars

Responses: 1 out of 15

Q9 How should OHA change this deliverable?

Responses: 1 out of 15

- Combine with another deliverable: 1
 - PCPCH VBP Data and Care Delivery Area VBP Data Template, Exhibit L16, APAC Payment Arrangement File, the actual annual VBP Interview

Q10: What other feedback do you have about improving this deliverable?

Responses: 1 out of 15

- Review for need and duplication. Greater overlap and duplication of details with the PCPCH VBP template. Deliverable is only a precursor to the actual interviews with CCO executives that also take place.

Deliverable 44: Continued from previous page

How many OHA staff chose this deliverable? 1

Q107 Primary purpose for deliverable submission to OHA – Responses: 1 out of 1

Document compliance	Share plans / future activities	Report performance for monitoring	Progress report for projects / programs	Inclusion in state / federal reporting	Identify designee / contacts
0 (0% of Q107 responses)	0 (0% of Q107 responses)	1 (100% of Q107 responses)	0 (0% of Q107 responses)	0 (0% of Q107 responses)	0 (0% of Q107 responses)

Q108 How submission information is used by OHA – Responses: 1 out of 1

Acknowledge receipt only	Evaluate / return results (Includes attestations)	Internal reporting	External reporting
0 (0% of Q108 responses)	1 (100% of Q108 responses)	0 (0% of Q108 responses)	0 (0% of Q108 responses)

Q109 Awareness of other OHA staff or units who use information from same deliverable?

Responses: 1 out of 1

- Yes: 1
- No: 0

Q110 Awareness of other Contract deliverables that ask for the same or similar information?

Responses: 1 out of 1

- Yes: 0
- No: 1

Q111 OHA Staff Involvement – Responses: 1 out of 1

Please tell us about how much time it takes to review the deliverable(s) you evaluate or coordinate.

I am lead for this deliverable	Total staff time required per CCO				
	< 30 minutes	0.5-2 hours	3-5 hours	6-10 hours	11+ hours
0 (0% of Q111 responses)	0 (0% of Q111 responses)	0 (0% of Q111 responses)	1 (100% of Q111 responses)	0 (0% of Q111 responses)	0 (0% of Q111 responses)

Deliverable 45: Grievance and Appeal System Policies and Procedures [Ex. I, Sec. 10, Para. a (1-3)]

How many CCO staff members chose this deliverable? 18

Q5 Staff Involvement – Responses: 16 out of 18

I am lead for this deliverable	Requires help from other staff	Less than 5 total staff hours required	5 – 10 total staff hours required	10-15 total staff hours required	15+ total staff hours required
4 (25% of Q5 responses)	11 (68.75% of Q5 responses)	1 (6.25% of Q5 responses)	4 (25% of Q5 responses)	2 (12.50% of Q5 responses)	7 (43.75% of Q5 responses)

Q6 Issues – Responses: 10 out of 18

We DO NOT use the information for internal operations	The submission does not change year over year	Another deliverable asks for same info	Deliverable has inconvenient due date	Too many submissions required per year
1 (10% of Q6 responses)	5 (50% of Q6 responses)	3 (30% of Q6 responses)	1 (10% of Q6 responses)	3 (30% of Q6 responses)

Q8 Satisfaction 1 to 5 stars: 1.25 stars

Responses: 3 out of 18

Q9 How should OHA change this deliverable?

Responses: 3 out of 18

- Remove deliverable: 1
- None of the above: 2

Q10: What other feedback do you have about improving this deliverable?

Responses: 3 out of 18

- Move the deliverable to sooner in the prior calendar year than the OAR requirement review year. For example, it is the 3rd week in April and we are receiving our first round of feedback. Shouldn't we be reviewing our 2023 P&P's earlier in 2022 to meet calendar year and HSAG audits?
- The Grievance System Policies and Template review is only changed when OHA makes changes. In addition, this area is always part of the HSAG regardless of the audit focus area as it affects members, providers and systems. There is repeated submissions of the same policies and templates for these deliverables.
- This deliverable is especially time consuming and requires multiple staff to complete. The feedback from OHA has been inconsistent and does not impact the actual operations. Sections of the P&P that met the same criteria in the previous calendar year, may not meet it the following year for the same exact element criteria. This deliverable is often underscored due to the missing of a single irrelevant word missing from the reviewers preference. Review comments are also repetitive and require more time administratively, making this deliverable more difficult to manage.

Deliverable 45: Continued from previous page

How many OHA staff chose this deliverable? 10

Q107 Primary purpose for deliverable submission to OHA – Responses: 8 out of 10

Document compliance	Share plans / future activities	Report performance for monitoring	Progress report for projects / programs	Inclusion in state / federal reporting	Identify designee / contacts
4 (50% of Q107 responses)	0 (0% of Q107 responses)	3 (37.50% of Q107 responses)	0 (0% of Q107 responses)	0 (0% of Q107 responses)	1 (12.50% of Q107 responses)

Q108 How submission information is used by OHA – Responses: 8 out of 10

Acknowledge receipt only	Evaluate / return results (Includes attestations)	Internal reporting	External reporting
1 (12.50% of Q108 responses)	8 (100% of Q108 responses)	2 (25% of Q108 responses)	1 (12.50% of Q108 responses)

Q109 Awareness of other OHA staff or units who use information from same deliverable?

Responses: 7 out of 10

- Yes: 1
- No: 6

Q110 Awareness of other Contract deliverables that ask for the same or similar information?

Responses: 7 out of 10

- Yes: 2
- No: 5

Q111 OHA Staff Involvement – Responses: 8 out of 10

Please tell us about how much time it takes to review the deliverable(s) you evaluate or coordinate.

I am lead for this deliverable	Total staff time required per CCO				
	< 30 minutes	0.5-2 hours	3-5 hours	6-10 hours	11+ hours
1 (12.50% of Q111 responses)	0 (0% of Q111 responses)	0 (0% of Q111 responses)	2 (25% of Q111 responses)	2 (25% of Q111 responses)	3 (37.50% of Q111 responses)

Deliverable 46: Grievance and Appeal Member Notice Templates [Ex. I, Sec. 10, Para. a (1-3)]

How many CCO staff members chose this deliverable? 22

Q5 Staff Involvement – Responses: 21 out of 22

I am lead for this deliverable	Requires help from other staff	Less than 5 total staff hours required	5 – 10 total staff hours required	10-15 total staff hours required	15+ total staff hours required
4 (19.05% of Q5 responses)	17 (80.95% of Q5 responses)	0 (0% of Q5 responses)	6 (28.57% of Q5 responses)	4 (19.05% of Q5 responses)	10 (47.62% of Q5 responses)

Q6 Issues – Responses: 8 out of 22

We DO NOT use the information for internal operations	The submission does not change year over year	Another deliverable asks for same info	Deliverable has inconvenient due date	Too many submissions required per year
0 (0% of Q6 responses)	3 (37.50% of Q6 responses)	1 (12.50% of Q6 responses)	1 (12.50% of Q6 responses)	4 (50% of Q6 responses)

Q8 Satisfaction 1 to 5 stars: 2.5 stars

Responses: 4 out of 22

Q9 How should OHA change this deliverable?

Responses: 6 out of 22

- Change the format: 3
- Don't change the deliverable: 1
- Change from scheduled to ad hoc: 1
- None of the above: 1

Q10: What other feedback do you have about improving this deliverable?

Responses: 4 out of 22

- I feel that reviewing documents provided by IHN are not consistent from reviewers to reviewers.
- The table format is very difficult to provide narrative due to the shifting of cells.
- Review templates earlier in the year. Our 2022 templates were not approved until 01/05/23. They were not implemented in calendar year 2022, the year of our HSAG review. We are currently in our first round of sendbacks for the 2023 templates in the 3rd week of April.
- This deliverable is so focused on the required elements that the readability suffers. Most members don't understand the letters we send them, and it would be helpful to have a more frank conversation with members as part of the conversation to determine what information should be contained in each document (e.g. NOABD, grievance resolution letter, etc.).
- More streamlined and timely (earlier) notification of changes. Templates and deliverables of this nature take a significant amount of configuration and system updates that require more than the 90 days notice stated in the contract.

Deliverable 46: Continued from previous page

How many OHA staff chose this deliverable? 9

Q107 Primary purpose for deliverable submission to OHA – Responses: 8 out of 9

Document compliance	Share plans / future activities	Report performance for monitoring	Progress report for projects / programs	Inclusion in state / federal reporting	Identify designee / contacts
5 (62.50% of Q107 responses)	0 (0% of Q107 responses)	2 (25% of Q107 responses)	0 (0% of Q107 responses)	0 (0% of Q107 responses)	1 (12.50% of Q107 responses)

Q108 How submission information is used by OHA – Responses: 8 out of 9

Acknowledge receipt only	Evaluate / return results (Includes attestations)	Internal reporting	External reporting
1 (12.50% of Q108 responses)	8 (100% of Q108 responses)	2 (25% of Q108 responses)	1 (12.50% of Q108 responses)

Q109 Awareness of other OHA staff or units who use information from same deliverable?

Responses: 7 out of 9

- Yes: 2
- No: 5

Q110 Awareness of other Contract deliverables that ask for the same or similar information?

Responses: 7 out of 9

- Yes: 2
- No: 5

Q111 OHA Staff Involvement – Responses: 8 out of 9

Please tell us about how much time it takes to review the deliverable(s) you evaluate or coordinate.

I am lead for this deliverable	Total staff time required per CCO				
	< 30 minutes	0.5-2 hours	3-5 hours	6-10 hours	11+ hours
1 (12.50% of Q111 responses)	0 (0% of Q111 responses)	0 (0% of Q111 responses)	4 (50% of Q111 responses)	2 (25% of Q111 responses)	1 (12.50% of Q111 responses)

Deliverable 47: Grievance and Appeal System Log and all ABA and Hep C NOABDs [Ex. I, Sec. 10, Para. B]

How many CCO staff members chose this deliverable? 22

Q5 Staff Involvement – Responses: 19 out of 22

I am lead for this deliverable	Requires help from other staff	Less than 5 total staff hours required	5 – 10 total staff hours required	10-15 total staff hours required	15+ total staff hours required
5 (26.32% of Q5 responses)	14 (73.68% of Q5 responses)	2 (10.53% of Q5 responses)	5 (26.32% of Q5 responses)	3 (15.79% of Q5 responses)	8 (42.11% of Q5 responses)

Q6 Issues – Responses: 9 out of 22

We DO NOT use the information for internal operations	The submission does not change year over year	Another deliverable asks for same info	Deliverable has inconvenient due date	Too many submissions required per year
1 (11.11% of Q6 responses)	1 (11.11% of Q6 responses)	2 (22.22% of Q6 responses)	1 (11.11% of Q6 responses)	5 (55.56% of Q6 responses)

Q8 Satisfaction 1 to 5 stars: 2 stars

Responses: 5 out of 22

Q9 How should OHA change this deliverable?

Responses: 5 out of 22

- Change the format: 3
- Don't change the deliverable: 1
- Remove the deliverable: 1

Q10: What other feedback do you have about improving this deliverable?

Responses: 3 out of 22

- The NOABD is updated multiple times in a year which is burdensome, and costly. The process of those changes has multiple individuals and departments involved along with the print vendors who have changes and testing to do before implementing. If the OHA wishes to control the verbiage on the NOABD both pre and post service, please create a form and keep it static for at least 2 years unless something major changes. Then the member will receive consistent messages regardless of which CCO they are a part of and less problematic on each CCO making changes and staff time at OHA critiquing what changes should occur. The post service NOABD (denial of claim payment) should not include remarks which indicate that there was any clinical review done at the time of claims payment, The member had the service, the claim is reviewed to determine if the provider followed the necessary steps to receive payment.
- I would suggest that this could be submitted on an annual basis instead of quarterly, perhaps with a breakdown by quarter. There is not enough change in data trends quarter over quarter for meaningful analysis. I would also eliminate the requirement to submit ABA/Hep C NOABDs specifically - especially given recent coverage changes in Hep C drugs making denials even more unlikely. It seems the need for increased scrutiny for these two services hasn't been as relevant for years now.

- Submission of multiple member records through email is not sustainable without a secure file transfer site of solution. The administrative burden submitting through secure emails is excessive and creates opportunities for submission error.

How many OHA staff chose this deliverable? 7

Q107 Primary purpose for deliverable submission to OHA – Responses: 0 out of 7

Document compliance	Share plans / future activities	Report performance for monitoring	Progress report for projects / programs	Inclusion in state / federal reporting	Identify designee / contacts
1 (14.29% of Q107 responses)	0 (0% of Q107 responses)	3 (42.86% of Q107 responses)	0 (0% of Q107 responses)	2 (28.57% of Q107 responses)	1 (14.29% of Q107 responses)

Q108 How submission information is used by OHA – Responses: 7 out of 7

Acknowledge receipt only	Evaluate / return results (Includes attestations)	Internal reporting	External reporting
1 (14.29% of Q108 responses)	4 (57.14% of Q108 responses)	3 (42.86% of Q108 responses)	4 (57.14% of Q108 responses)

Q109 Awareness of other OHA staff or units who use information from same deliverable?

Responses: 6 out of 7

- Yes: 5
- No: 1

Q110 Awareness of other Contract deliverables that ask for the same or similar information?

Responses: 6 out of 7

- Yes: 2
- No: 4

Q111 OHA Staff Involvement – Responses: 6 out of 7

Please tell us about how much time it takes to review the deliverable(s) you evaluate or coordinate.

I am lead for this deliverable	Total staff time required per CCO				
	< 30 minutes	0.5-2 hours	3-5 hours	6-10 hours	11+ hours
2 (33.33% of Q111 responses)	0 (0% of Q111 responses)	1 (16.67% of Q111 responses)	1 (16.67% of Q111 responses)	0 (0% of Q111 responses)	2 (33.33% of Q111 responses)

Deliverable 48: Grievance and Appeal System Quarterly Report [Ex. I, Sec. 10, Para. C]

How many CCO staff members chose this deliverable? 24

Q5 Staff Involvement – Responses: 23 out of 24

I am lead for this deliverable	Requires help from other staff	Less than 5 total staff hours required	5 – 10 total staff hours required	10-15 total staff hours required	15+ total staff hours required
6 (26.09% of Q5 responses)	16 (69.57% of Q5 responses)	5 (21.74% of Q5 responses)	6 (26.09% of Q5 responses)	3 (13.04% of Q5 responses)	8 (34.78% of Q5 responses)

Q6 Issues – Responses: 10 out of 24

We DO NOT use the information for internal operations	The submission does not change year over year	Another deliverable asks for same info	Deliverable has inconvenient due date	Too many submissions required per year
2 (20% of Q6 responses)	2 (20% of Q6 responses)	1 (10% of Q6 responses)	0 (0% of Q6 responses)	6 (60% of Q6 responses)

Q8 Satisfaction 1 to 5 stars: 3 stars

Responses: 1 out of 24

Q9 How should OHA change this deliverable?

Responses: 2 out of 24

- Change the format: 2

Q10: What other feedback do you have about improving this deliverable?

Responses: 2 out of 24

- Notification Dates/Times were an unnecessary addition. Additionally, because PAs now have their own log, because Outstanding documents have been removed, and because PAs might be received in one quarter and resolved in another, there is a lack of continuity in the new report.
- I would suggest this become an annual report, rather than quarterly. There is not enough variation in the data quarter over quarter for meaningful analysis. I would also suggest that some questions be removed or reworked to be more meaningful. Some of the current questions receive the same answer every time we submit, because they ask about processes that don't change.

Deliverable 48: Continued from previous page

How many OHA staff chose this deliverable? 9

Q107 Primary purpose for deliverable submission to OHA – Responses: 9 out of 9

Document compliance	Share plans / future activities	Report performance for monitoring	Progress report for projects / programs	Inclusion in state / federal reporting	Identify designee / contacts
3 (33.33% of Q107 responses)	1 (11.11% of Q107 responses)	3 (33.33% of Q107 responses)	0 (0% of Q107 responses)	1 (11.11% of Q107 responses)	1 (11.11% of Q107 responses)

Q108 How submission information is used by OHA – Responses: 9 out of 9

Acknowledge receipt only	Evaluate / return results (Includes attestations)	Internal reporting	External reporting
2 (22.22% of Q108 responses)	5 (55.56% of Q108 responses)	3 (33.33% of Q108 responses)	2 (22.22% of Q108 responses)

Q109 Awareness of other OHA staff or units who use information from same deliverable?

Responses: 8 out of 9

- Yes: 4
- No: 4

Q110 Awareness of other Contract deliverables that ask for the same or similar information?

Responses: 8 out of 9

- Yes: 1
- No: 7

Q111 OHA Staff Involvement – Responses: 5 out of 9

Please tell us about how much time it takes to review the deliverable(s) you evaluate or coordinate.

I am lead for this deliverable	Total staff time required per CCO				
	< 30 minutes	0.5-2 hours	3-5 hours	6-10 hours	11+ hours
2 (40% of Q111 responses)	0 (0% of Q111 responses)	0 (0% of Q111 responses)	1 (20% of Q111 responses)	1 (20% of Q111 responses)	1 (20% of Q111 responses)

Deliverable 49: Health Information Technology (HIT) Roadmap and Data [Ex. J, Sec. 2, Para. D]

How many CCO staff members chose this deliverable? 27

Q5 Staff Involvement – Responses: 25 out of 27

I am lead for this deliverable	Requires help from other staff	Less than 5 total staff hours required	5 – 10 total staff hours required	10-15 total staff hours required	15+ total staff hours required
7 (28% of Q5 responses)	17 (68% of Q5 responses)	1 (4% of Q5 responses)	1 (4% of Q5 responses)	2 (8% of Q5 responses)	21 (84% of Q5 responses)

Q6 Issues – Responses: 16 out of 27

We DO NOT use the information for internal operations	The submission does not change year over year	Another deliverable asks for same info	Deliverable has inconvenient due date	Too many submissions required per year
3 (18.75% of Q6 responses)	2 (12.50% of Q6 responses)	6 (37.50% of Q6 responses)	5 (31.25% of Q6 responses)	4 (25% of Q6 responses)

Q8 Satisfaction 1 to 5 stars: 3.43 stars

Responses: 5 out of 27

Q9 How should OHA change this deliverable?

Responses: 5 out of 27

- Don't change the deliverable: 1
- Remove the deliverable: 1
- Change from scheduled to ad hoc: 2
- None of the above: 1

Q10: What other feedback do you have about improving this deliverable?

Responses: 4 out of 27

- The provider data collection requirement seems to lack enough focus on ensuring that provider HIT capabilities (which improve outcomes) have the greatest impact on the greatest number of members.
- Focus on EHR adoption and provider information gathering doesn't align with where we are as an industry and is inefficient and unreliable. If greater information is needed regarding EHR and HIE usage, it would be more effective an efficient to make this part of provider licensure/renewal processes.
- This deliverable helps us meet objectives and is reviewed in a timely manner.
- The OHA team supporting the HIT Roadmap have been great to work with. They incorporate information gathered from multiple sources and use it to reflect the state of CCO HIT efforts. The roadmap itself is a bit redundant, asking very similar questions at the CCO and provider level, but OHA has been accommodating in offering multiple templates and technical assistance, which we appreciate. It is simply a lot of information that takes essentially an entire month of Sr. Leadership's available time to complete.

Deliverable 50: Health Equity Plan (HEP), Training and Education report, HEA Progress Report [Ex. K, Sec. 10, Para. A]

How many CCO staff members chose this deliverable? 32

Q5 Staff Involvement – Responses: 31 out of 32

I am lead for this deliverable	Requires help from other staff	Less than 5 total staff hours required	5 – 10 total staff hours required	10-15 total staff hours required	15+ total staff hours required
10 (32.26% of Q5 responses)	25 (80.65% of Q5 responses)	0 (0% of Q5 responses)	0 (0% of Q5 responses)	3 (9.68% of Q5 responses)	28 (90.32% of Q5 responses)

Q6 Issues – Responses: 15 out of 32

We DO NOT use the information for internal operations	The submission does not change year over year	Another deliverable asks for same info	Deliverable has inconvenient due date	Too many submissions required per year
3 (20% of Q6 responses)	1 (6.67% of Q6 responses)	14 (93.33% of Q6 responses)	3 (20% of Q6 responses)	4 (26.67% of Q6 responses)

Q8 Satisfaction 1 to 5 stars: 2.65 stars

Responses: 10 out of 32

Q9 How should OHA change this deliverable?

Responses: 10 out of 32

- Change the format: 6
- Combine with another deliverable: 2
 - Align with NCQA Health Equity Measures
 - Health equity is the mission of Medicaid. It's pertinent to all of the work. Confusing to have it identify such specific bodies of work, and in a prescriptive manner.
- None of the above: 2

Q10: What other feedback do you have about improving this deliverable?

Responses: 9 out of 32

- Major changes in the expectation are not communicated timely, and there has been little consistency year over year on the reporting structure. Preparing this deliverable takes a considerable amount of time and collaboration among many stakeholders, and the lack of consistency from year to year results in us having to pivot last minute, and it does not feel like we are able to do this work meaningfully, and feels more like a check box activity.
- The deliverable is too prescriptive and does not allow for the CCO to determine the activities that are the most vital for advancing equity within our organization and the communities we serve. For example, some of our most impactful equity work does not even fit into the template provided. We end up reporting random activities that fit into the HEP focus areas, rather than the actual equity focused work we are advancing.
- 1. Timing of report to align with calendar year; 2. Align with NCQA; 3. Clearer strategy around scoring criteria and what information the deliverable/question is designed to get at (more framework to focus on building up programming responsive to the criteria in the deliverable)--Leads to more intentional work across the state with clear strategy for all CCOs.

- This deliverable includes duplicates from other reports the CCO submits to OHA such as the TQS.
- This is an onerous deliverable for a few reasons- nothing about the content! It is very valuable and the feedback from OEI is always wonderful. However, it is not fully aligned with our original health equity plan which poses difficulties. The changes are good, but I think it should be more flexible on what we report on. Also, the REALD/SOGI data does not belong here, it is more operational rather than fitting in the narrative and goal style of the health equity plan. I think REALD/SOGI should have a different structure and different reporting requirements that can be reported on by CCO Operations rather than the equity or SDoH departments/divisions. We are developing a new health equity plan and will work to align with OHA, but when the goalposts move (new focus areas etc.) it makes it difficult to see system change.
- There's a lot of duplication in this deliverable across other deliverables. I like the updated training spreadsheets. This deliverable is set up for internal and OHA review/assessment, but not necessarily public facing - unsure how to have a public facing other than create an additional document.
- The Health Equity Plan asks questions that are repeated across multiple other reports. It should not be graded -- as the work is ongoing and difficult to measure. Grading demoralizes staff who work so hard on this. The format is incredibly difficult to use.
- For this deliverable we have just received a new template and we are less than 90 days from submission. We would like to see these templates earlier on. Additionally we still have not received feedback from our last submission. We would like to see feedback within 90 days post-submission.
- The heavy narrative/qualitative reporting aspects of this reporting is very time intensive and require multiple hours from multiple staff to complete. Without timely feedback from OHA staff, it's difficult to know if submissions are meeting contract requirements.

Deliverable 50: Continued from previous page

How many OHA staff chose this deliverable? 1

Q107 Primary purpose for deliverable submission to OHA – Responses: 1 out of 1

Document compliance	Share plans / future activities	Report performance for monitoring	Progress report for projects / programs	Inclusion in state / federal reporting	Identify designee / contacts
0 (0% of Q107 responses)	0 (0% of Q107 responses)	1 (100% of Q107 responses)	0 (0% of Q107 responses)	0 (0% of Q107 responses)	0 (0% of Q107 responses)

Q108 How submission information is used by OHA – Responses: 1 out of 1

Acknowledge receipt only	Evaluate / return results (Includes attestations)	Internal reporting	External reporting
0 (0% of Q108 responses)	1 (100% of Q108 responses)	0 (0% of Q108 responses)	0 (0% of Q108 responses)

Q109 Awareness of other OHA staff or units who use information from same deliverable?

Responses: 0 out of 1

- Yes: 0
- No: 0

Q110 Awareness of other Contract deliverables that ask for the same or similar information?

Responses: 1 out of 1

- Yes: 0
- No: 1

Q111 OHA Staff Involvement – Responses: 1 out of 1

Please tell us about how much time it takes to review the deliverable(s) you evaluate or coordinate.

I am lead for this deliverable	Total staff time required per CCO				
	< 30 minutes	0.5-2 hours	3-5 hours	6-10 hours	11+ hours
0 (0% of Q111 responses)	0 (0% of Q111 responses)	0 (0% of Q111 responses)	0 (0% of Q111 responses)	1 (100% of Q111 responses)	0 (0% of Q111 responses)

Deliverable 51: Traditional Health Worker (THW) Integration and Utilization Plan [Ex. K, Sec. 11, Para. a (7)]

How many CCO staff members chose this deliverable? 16

Q5 Staff Involvement – Responses: 14 out of 16

I am lead for this deliverable	Requires help from other staff	Less than 5 total staff hours required	5 – 10 total staff hours required	10-15 total staff hours required	15+ total staff hours required
5 (35.71% of Q5 responses)	11 (78.57% of Q5 responses)	1 (7.14% of Q5 responses)	0 (0% of Q5 responses)	3 (21.43% of Q5 responses)	10 (71.43% of Q5 responses)

Q6 Issues – Responses: 7 out of 16

We DO NOT use the information for internal operations	The submission does not change year over year	Another deliverable asks for same info	Deliverable has inconvenient due date	Too many submissions required per year
3 (42.86% of Q6 responses)	0 (0% of Q6 responses)	4 (57.14% of Q6 responses)	2 (28.57% of Q6 responses)	1 (14.29% of Q6 responses)

Q8 Satisfaction 1 to 5 stars: 2 stars

Responses: 3 out of 16

Q9 How should OHA change this deliverable?

Responses: 3 out of 16

- Change the format: 1
- None of the above: 2

Q10: What other feedback do you have about improving this deliverable?

Responses: 3 out of 16

- OHA Staff are not grading to the questions on the deliverable, and bringing criteria outside of the submission request.
- OHA/OEI need to involve the Behavioral Health provider community more in their TA because they are duplicating, providing misinformation and confusing CCOs/THW regarding Peers. From a BH perspective, the THW plan, grid and report do not add any value for BH peers/services. Lastly, the guidance that OEI gives was extremely confusing in the beginning and has only mildly gotten better. Again, there is no value that OEI has as far as Peers and they should really work with OHA/HSD to improve that. There could be an opportunity to align CCOs around Peers and help push for more/better trainings, payments/rates, and better support the peer workforce, etc.
- 1. Change format as questions are repetitive; 2. THW U&I Data reporting is a challenge in response rates for CBOs that are not otherwise reporting this data--barrier to access for CBOs and complication in reporting;

Deliverable 51: Continued from previous page

How many OHA staff chose this deliverable? 2

Q107 Primary purpose for deliverable submission to OHA – Responses: 1 out of 2

Document compliance	Share plans / future activities	Report performance for monitoring	Progress report for projects / programs	Inclusion in state / federal reporting	Identify designee / contacts
0 (0% of Q107 responses)	0 (0% of Q107 responses)	0 (0% of Q107 responses)	1 (100% of Q107 responses)	0 (0% of Q107 responses)	0 (0% of Q107 responses)

Q108 How submission information is used by OHA – Responses: 1 out of 2

Acknowledge receipt only	Evaluate / return results (Includes attestations)	Internal reporting	External reporting
0 (0% of Q108 responses)	1 (100% of Q108 responses)	0 (0% of Q108 responses)	1 (100% of Q108 responses)

Q109 Awareness of other OHA staff or units who use information from same deliverable?

Responses: 1 out of 2

- Yes: 0
- No: 1

Q110 Awareness of other Contract deliverables that ask for the same or similar information?

Responses: 1 out of 2

- Yes: 0
- No: 1

Q111 OHA Staff Involvement – Responses: 1 out of 2

Please tell us about how much time it takes to review the deliverable(s) you evaluate or coordinate.

I am lead for this deliverable	Total staff time required per CCO				
	< 30 minutes	0.5-2 hours	3-5 hours	6-10 hours	11+ hours
1 (100% of Q111 responses)	0 (0% of Q111 responses)	0 (0% of Q111 responses)	0 (0% of Q111 responses)	1 (100% of Q111 responses)	1 (100% of Q111 responses)

Deliverable 52: THW Payment Grid [Ex. K, Sec. 11, Para. B]

How many CCO staff members chose this deliverable? 14

Q5 Staff Involvement – Responses: 13 out of 14

I am lead for this deliverable	Requires help from other staff	Less than 5 total staff hours required	5 – 10 total staff hours required	10-15 total staff hours required	15+ total staff hours required
5 (38.46% of Q5 responses)	9 (69.23% of Q5 responses)	1 (7.69% of Q5 responses)	0 (0% of Q5 responses)	5 (38.46% of Q5 responses)	7 (53.85% of Q5 responses)

Q6 Issues – Responses: 5 out of 14

We DO NOT use the information for internal operations	The submission does not change year over year	Another deliverable asks for same info	Deliverable has inconvenient due date	Too many submissions required per year
4 (80% of Q6 responses)	0 (0% of Q6 responses)	1 (20% of Q6 responses)	1 (20% of Q6 responses)	0 (0% of Q6 responses)

Q8 Satisfaction 1 to 5 stars: 3 stars

Responses: 1 out of 14

Q9 How should OHA change this deliverable?

Responses: 1 out of 14

- Change the format: 1

Q10: What other feedback do you have about improving this deliverable?

Responses: 1 out of 14

- Request template for this deliverables to be universal for all CCOs to ensure that reporting is in alignment statewide

Deliverable 52: Continued from previous page

How many OHA staff chose this deliverable? 2

Q107 Primary purpose for deliverable submission to OHA – Responses: 1 out of 2

Document compliance	Share plans / future activities	Report performance for monitoring	Progress report for projects / programs	Inclusion in state / federal reporting	Identify designee / contacts
0 (0% of Q107 responses)	0 (0% of Q107 responses)	1 (100% of Q107 responses)	0 (0% of Q107 responses)	0 (0% of Q107 responses)	0 (0% of Q107 responses)

Q108 How submission information is used by OHA – Responses: 1 out of 2

Acknowledge receipt only	Evaluate / return results (Includes attestations)	Internal reporting	External reporting
0 (0% of Q108 responses)	1 (100% of Q108 responses)	0 (0% of Q108 responses)	1 (100% of Q108 responses)

Q109 Awareness of other OHA staff or units who use information from same deliverable?

Responses: 1 out of 2

- Yes: 1
- No: 0

Q110 Awareness of other Contract deliverables that ask for the same or similar information?

Responses: 1 out of 2

- Yes: 0
- No: 1

Q111 OHA Staff Involvement – Responses: 1 out of 2

Please tell us about how much time it takes to review the deliverable(s) you evaluate or coordinate.

I am lead for this deliverable	Total staff time required per CCO				
	< 30 minutes	0.5-2 hours	3-5 hours	6-10 hours	11+ hours
1 (0% of Q111 responses)	0 (0% of Q111 responses)	1 (0% of Q111 responses)	0 (0% of Q111 responses)	0 (0% of Q111 responses)	0 (0% of Q111 responses)

Deliverable 53: THW Integration and Utilization Report [Ex. K, Sec. 11, Para. F]

How many CCO staff members chose this deliverable? 14

Q5 Staff Involvement – Responses: 13 out of 14

I am lead for this deliverable	Requires help from other staff	Less than 5 total staff hours required	5 – 10 total staff hours required	10-15 total staff hours required	15+ total staff hours required
4 (30.77% of Q5 responses)	10 (76.92% of Q5 responses)	0 (0% of Q5 responses)	1 (7.69% of Q5 responses)	5 (38.46% of Q5 responses)	7 (53.85% of Q5 responses)

Q6 Issues – Responses: 7 out of 14

We DO NOT use the information for internal operations	The submission does not change year over year	Another deliverable asks for same info	Deliverable has inconvenient due date	Too many submissions required per year
4 (57.14% of Q6 responses)	0 (0% of Q6 responses)	4 (57.14% of Q6 responses)	1 (14.29% of Q6 responses)	0 (0% of Q6 responses)

Q8 Satisfaction 1 to 5 stars: 2 stars

Responses: 1 out of 14

Q9 How should OHA change this deliverable?

Responses: 1 out of 14

- Change the format: 1

Q10: What other feedback do you have about improving this deliverable?

Responses: 1 out of 14

- Manual calculations of external reports from CBOs to enter in a total number is time prohibitive and inconsistent among CCOs.

Deliverable 53: Continued from previous page

How many OHA staff chose this deliverable? 2

Q107 Primary purpose for deliverable submission to OHA – Responses: 1 out of 2

Document compliance	Share plans / future activities	Report performance for monitoring	Progress report for projects / programs	Inclusion in state / federal reporting	Identify designee / contacts
0 (0% of Q107 responses)	0 (0% of Q107 responses)	1 (100% of Q107 responses)	0 (0% of Q107 responses)	0 (0% of Q107 responses)	0 (0% of Q107 responses)

Q108 How submission information is used by OHA – Responses: 1 out of 2

Acknowledge receipt only	Evaluate / return results (Includes attestations)	Internal reporting	External reporting
0 (0% of Q108 responses)	1 (100% of Q108 responses)	1 (100% of Q108 responses)	0 (0% of Q108 responses)

Q109 Awareness of other OHA staff or units who use information from same deliverable?

Responses: 1 out of 2

- Yes: 0
- No: 1

Q110 Awareness of other Contract deliverables that ask for the same or similar information?

Responses: 1 out of 2

- Yes: 0
- No: 1

Q111 OHA Staff Involvement – Responses: 1 out of 2

Please tell us about how much time it takes to review the deliverable(s) you evaluate or coordinate.

I am lead for this deliverable	Total staff time required per CCO				
	< 30 minutes	0.5-2 hours	3-5 hours	6-10 hours	11+ hours
0 (0% of Q111 responses)	1 (100% of Q111 responses)	0 (0% of Q111 responses)	0 (0% of Q111 responses)	0 (0% of Q111 responses)	0 (0% of Q111 responses)

Deliverable 54: CAC Member Demographic Report - Annual [Ex. K, Sec. 5, Para. C]

How many CCO staff members chose this deliverable? 20

Q5 Staff Involvement – Responses: 17 out of 20

I am lead for this deliverable	Requires help from other staff	Less than 5 total staff hours required	5 – 10 total staff hours required	10-15 total staff hours required	15+ total staff hours required
7 (41.18% of Q5 responses)	12 (70.59% of Q5 responses)	2 (11.76% of Q5 responses)	7 (41.18% of Q5 responses)	3 (17.65% of Q5 responses)	5 (29.41% of Q5 responses)

Q6 Issues – Responses: 6 out of 20

We DO NOT use the information for internal operations	The submission does not change year over year	Another deliverable asks for same info	Deliverable has inconvenient due date	Too many submissions required per year
4 (66.67% of Q6 responses)	2 (33.33% of Q6 responses)	3 (50% of Q6 responses)	2 (33.33% of Q6 responses)	3 (50% of Q6 responses)

Q8 Satisfaction 1 to 5 stars: 2.16 stars

Responses: 3 out of 20

Q9 How should OHA change this deliverable?

Responses: 3 out of 20

- Change the format: 1
- Combine with another deliverable: 1
 - Health Equity Plan
- None of the above: 1

Q10: What other feedback do you have about improving this deliverable?

Responses: 2 out of 20

- Many of my CAC members have reported back to me they feel this demographics report is very invasive. most have questioned why they need to break down specifically what kind of "white" or "black" they are. I have had many (nearly 50%) that have refused to answer.
- We are asked in several deliverables to attest to having engaged with Tribes. This should absolutely be changed to be more responsive to the rights and asks of sovereign entities and also to include Indigenous people whose Tribal governments are outside our region's borders. Additionally the causes of health inequity and the high level, observable disparities do not change from year to year, yet we are asked to rehash the causes--which namely come down to racism, ableism, etc. Our CACs also frankly are asked to do this in ways that other governing groups are not, and it feels incredibly extractive to them on premise alone. Our successful implementation has depended on pushing back on that premise each year.

Deliverable 54: Continued from previous page

How many OHA staff chose this deliverable? 1

Q107 Primary purpose for deliverable submission to OHA – Responses: 1 out of 1

Document compliance	Share plans / future activities	Report performance for monitoring	Progress report for projects / programs	Inclusion in state / federal reporting	Identify designee / contacts
0 (0% of Q107 responses)	0 (0% of Q107 responses)	1 (100% of Q107 responses)	0 (0% of Q107 responses)	0 (0% of Q107 responses)	0 (0% of Q107 responses)

Q108 How submission information is used by OHA – Responses: 1 out of 1

Acknowledge receipt only	Evaluate / return results (Includes attestations)	Internal reporting	External reporting
0 (0% of Q108 responses)	1 (100% of Q108 responses)	1 (100% of Q108 responses)	1 (100% of Q108 responses)

Q109 Awareness of other OHA staff or units who use information from same deliverable?

Responses: 1 out of 1

- Yes: 0
- No: 1

Q110 Awareness of other Contract deliverables that ask for the same or similar information?

Responses: 1 out of 1

- Yes: 0
- No: 1

Q111 OHA Staff Involvement – Responses: 1 out of 1

Please tell us about how much time it takes to review the deliverable(s) you evaluate or coordinate.

I am lead for this deliverable	Total staff time required per CCO				
	< 30 minutes	0.5-2 hours	3-5 hours	6-10 hours	11+ hours
1 (100% of Q111 responses)	0 (0% of Q111 responses)	1 (100% of Q111 responses)	0 (0% of Q111 responses)	0 (0% of Q111 responses)	0 (0% of Q111 responses)

Deliverable 55: Community Health Assessment (CHA) [Ex. K, Sec. 6, Para. H]

How many CCO staff members chose this deliverable? 26

Q5 Staff Involvement – Responses: 24 out of 26

I am lead for this deliverable	Requires help from other staff	Less than 5 total staff hours required	5 – 10 total staff hours required	10-15 total staff hours required	15+ total staff hours required
6 (25% of Q5 responses)	18 (75% of Q5 responses)	0 (0% of Q5 responses)	1 (4.17% of Q5 responses)	2 (8.33% of Q5 responses)	21 (87.50% of Q5 responses)

Q6 Issues – Responses: 7 out of 26

We DO NOT use the information for internal operations	The submission does not change year over year	Another deliverable asks for same info	Deliverable has inconvenient due date	Too many submissions required per year
2 (28.57% of Q6 responses)	4 (57.14% of Q6 responses)	3 (42.86% of Q6 responses)	1 (14.29% of Q6 responses)	2 (28.57% of Q6 responses)

Q8 Satisfaction 1 to 5 stars: 3 stars

Responses: 1 out of 26

Q9 How should OHA change this deliverable?

Responses: 1 out of 26

- Change the format: 1

Q10: What other feedback do you have about improving this deliverable?

Responses: 1 out of 26

- Formally bundle with the CHP; provide more upfront guidance on which CCOs have deliverables which years [at minimum, understanding some return them more frequently than the requirement]

Deliverable 55: Continued from previous page

How many OHA staff chose this deliverable? 5

Q107 Primary purpose for deliverable submission to OHA – Responses: 3 out of 5

Document compliance	Share plans / future activities	Report performance for monitoring	Progress report for projects / programs	Inclusion in state / federal reporting	Identify designee / contacts
0 (0% of Q107 responses)	2 (66.67% of Q107 responses)	1 (33.33% of Q107 responses)	0 (0% of Q107 responses)	0 (0% of Q107 responses)	0 (0% of Q107 responses)

Q108 How submission information is used by OHA – Responses: 3 out of 5

Acknowledge receipt only	Evaluate / return results (Includes attestations)	Internal reporting	External reporting
0 (0% of Q108 responses)	3 (100% of Q108 responses)	2 (66.67% of Q108 responses)	1 (33.33% of Q108 responses)

Q109 Awareness of other OHA staff or units who use information from same deliverable?

Responses: 3 out of 5

- Yes: 2
- No: 1

Q110 Awareness of other Contract deliverables that ask for the same or similar information?

Responses: 3 out of 5

- Yes: 1
- No: 2

Q111 OHA Staff Involvement – Responses: 4 out of 5

Please tell us about how much time it takes to review the deliverable(s) you evaluate or coordinate.

I am lead for this deliverable	Total staff time required per CCO				
	< 30 minutes	0.5-2 hours	3-5 hours	6-10 hours	11+ hours
3 (75% of Q111 responses)	0 (0% of Q111 responses)	1 (25% of Q111 responses)	2 (50% of Q111 responses)	3 (75% of Q111 responses)	0 (0% of Q111 responses)

Deliverable 56: Community Health Improvement Plan (CHP) [Ex. K, Sec. 7, Para. i]

How many CCO staff members chose this deliverable? 28

Q5 Staff Involvement – Responses: 26 out of 28

I am lead for this deliverable	Requires help from other staff	Less than 5 total staff hours required	5 – 10 total staff hours required	10-15 total staff hours required	15+ total staff hours required
8 (30.77% of Q5 responses)	20 (76.92% of Q5 responses)	0 (0% of Q5 responses)	2 (7.69% of Q5 responses)	2 (7.69% of Q5 responses)	22 (84.62% of Q5 responses)

Q6 Issues – Responses: 8 out of 28

We DO NOT use the information for internal operations	The submission does not change year over year	Another deliverable asks for same info	Deliverable has inconvenient due date	Too many submissions required per year
3 (37.50% of Q6 responses)	3 (37.50% of Q6 responses)	4 (50% of Q6 responses)	1 (12.50% of Q6 responses)	2 (25% of Q6 responses)

Q8 Satisfaction 1 to 5 stars: 4 stars

Responses: 2 out of 28

Q9 How should OHA change this deliverable?

Responses: 2 out of 28

- Combine with another deliverable: 1
 - CHA
- None of the above: 1

Q10: What other feedback do you have about improving this deliverable?

Responses: 2 out of 28

- If these are meant to be so important, it would be helpful to have less duplication of work between this deliverable and more clinical deliverables RE who we are required to involve. We do really cool work, but a lot of our partners are overtaxed with asks, and it makes it hard to "compete" for attention.
- Recommend reduction in length of this report as this is a significant lift for the community.

Deliverable 56: Continued from previous page

How many OHA staff chose this deliverable? 4

Q107 Primary purpose for deliverable submission to OHA – Responses: 3 out of 4

Document compliance	Share plans / future activities	Report performance for monitoring	Progress report for projects / programs	Inclusion in state / federal reporting	Identify designee / contacts
0 (0% of Q107 responses)	2 (66.67% of Q107 responses)	1 (33.33% of Q107 responses)	0 (0% of Q107 responses)	0 (0% of Q107 responses)	0 (0% of Q107 responses)

Q108 How submission information is used by OHA – Responses: 3 out of 4

Acknowledge receipt only	Evaluate / return results (Includes attestations)	Internal reporting	External reporting
0 (0% of Q108 responses)	3 (100% of Q108 responses)	3 (100% of Q108 responses)	3 (100% of Q108 responses)

Q109 Awareness of other OHA staff or units who use information from same deliverable?

Responses: 3 out of 4

- Yes: 2
- No: 1

Q110 Awareness of other Contract deliverables that ask for the same or similar information?

Responses: 3 out of 4

- Yes: 1
- No: 2

Q111 OHA Staff Involvement – Responses: 3 out of 4

Please tell us about how much time it takes to review the deliverable(s) you evaluate or coordinate.

I am lead for this deliverable	Total staff time required per CCO				
	< 30 minutes	0.5-2 hours	3-5 hours	6-10 hours	11+ hours
2 (66.67% of Q111 responses)	0 (0% of Q111 responses)	1 (33.33% of Q111 responses)	2 (66.67% of Q111 responses)	3 (100% of Q111 responses)	0 (0% of Q111 responses)

Deliverable 57: CHP Progress Report [Ex. K, Sec. 7, Para. L]

How many CCO staff members chose this deliverable? 21

Q5 Staff Involvement – Responses: 20 out of 21

I am lead for this deliverable	Requires help from other staff	Less than 5 total staff hours required	5 – 10 total staff hours required	10-15 total staff hours required	15+ total staff hours required
8 (40% of Q5 responses)	15 (75% of Q5 responses)	0 (0% of Q5 responses)	2 (10% of Q5 responses)	4 (20% of Q5 responses)	15 (75% of Q5 responses)

Q6 Issues – Responses: 7 out of 21

We DO NOT use the information for internal operations	The submission does not change year over year	Another deliverable asks for same info	Deliverable has inconvenient due date	Too many submissions required per year
2 (28.57% of Q6 responses)	0 (0% of Q6 responses)	4 (57.14% of Q6 responses)	4 (57.14% of Q6 responses)	3 (42.86% of Q6 responses)

Q8 Satisfaction 1 to 5 stars: 2 stars

Responses: 2 out of 21

Q9 How should OHA change this deliverable?

Responses: 2 out of 21

- Change the format: 2

Q10: What other feedback do you have about improving this deliverable?

Responses: 2 out of 21

- Make the questionnaire less redundant to the progress report and other reports.
- 1. This is a significant lift of a deliverable and takes a considerable amount of time to complete; 2. Questions don't seem to align; 3. Provide template further in advance of due date to allow for proper submission; 4. This deliverable also includes information that can also be found in HE Report & THW Report

Deliverable 57: Continued from previous page

How many OHA staff chose this deliverable? 3

Q107 Primary purpose for deliverable submission to OHA – Responses: 3 out of 3

Document compliance	Share plans / future activities	Report performance for monitoring	Progress report for projects / programs	Inclusion in state / federal reporting	Identify designee / contacts
0 (0% of Q107 responses)	0 (0% of Q107 responses)	1 (33.33% of Q107 responses)	2 (66.67% of Q107 responses)	0 (0% of Q107 responses)	0 (0% of Q107 responses)

Q108 How submission information is used by OHA – Responses: 3 out of 3

Acknowledge receipt only	Evaluate / return results (Includes attestations)	Internal reporting	External reporting
0 (0% of Q108 responses)	3 (100% of Q108 responses)	3 (100% of Q108 responses)	3 (100% of Q108 responses)

Q109 Awareness of other OHA staff or units who use information from same deliverable?

Responses: 3 out of 3

- Yes: 2
- No: 1

Q110 Awareness of other Contract deliverables that ask for the same or similar information?

Responses: 3 out of 3

- Yes: 0
- No: 3

Q111 OHA Staff Involvement – Responses: 3 out of 3

Please tell us about how much time it takes to review the deliverable(s) you evaluate or coordinate.

I am lead for this deliverable	Total staff time required per CCO				
	< 30 minutes	0.5-2 hours	3-5 hours	6-10 hours	11+ hours
3 (100% of Q111 responses)	2 (66.67% of Q111 responses)	3 (100% of Q111 responses)	0 (0% of Q111 responses)	0 (0% of Q111 responses)	0 (0% of Q111 responses)

Deliverable 58: SHARE Initiative Spending Proposed Plan [Ex. K, Sec. 8, Para. b (2)]

How many CCO staff members chose this deliverable? 18

Q5 Staff Involvement – Responses: 17 out of 18

I am lead for this deliverable	Requires help from other staff	Less than 5 total staff hours required	5 – 10 total staff hours required	10-15 total staff hours required	15+ total staff hours required
9 (52.94% of Q5 responses)	13 (76.47% of Q5 responses)	0 (0% of Q5 responses)	3 (3% of Q5 responses)	4 (23.53% of Q5 responses)	10 (58.82% of Q5 responses)

Q6 Issues – Responses: 7 out of 18

We DO NOT use the information for internal operations	The submission does not change year over year	Another deliverable asks for same info	Deliverable has inconvenient due date	Too many submissions required per year
3 (42.86% of Q6 responses)	0 (0% of Q6 responses)	4 (57.14% of Q6 responses)	1 (14.29% of Q6 responses)	2 (28.57% of Q6 responses)

Q8 Satisfaction 1 to 5 stars: 3 stars

Responses: 2 out of 18

Q9 How should OHA change this deliverable?

Responses: 2 out of 18

- Don't change the deliverable: 1
- None of the above: 1

Q10: What other feedback do you have about improving this deliverable?

Responses: 1 out of 18

- Streamline requirements to reduce workload burden on this deliverable

Deliverable 58: Continued from previous page

How many OHA staff chose this deliverable? 2

Q107 Primary purpose for deliverable submission to OHA – Responses: 2 out of 2

Document compliance	Share plans / future activities	Report performance for monitoring	Progress report for projects / programs	Inclusion in state / federal reporting	Identify designee / contacts
0 (0% of Q107 responses)	1 (50% of Q107 responses)	1 (50% of Q107 responses)	0 (0% of Q107 responses)	0 (0% of Q107 responses)	0 (0% of Q107 responses)

Q108 How submission information is used by OHA – Responses: 2 out of 2

Acknowledge receipt only	Evaluate / return results (Includes attestations)	Internal reporting	External reporting
0 (0% of Q108 responses)	2 (100% of Q108 responses)	2 (100% of Q108 responses)	1 (50% of Q108 responses)

Q109 Awareness of other OHA staff or units who use information from same deliverable?

Responses: 2 out of 2

- Yes: 2
- No: 0

Q110 Awareness of other Contract deliverables that ask for the same or similar information?

Responses: 2 out of 2

- Yes: 0
- No: 2

Q111 OHA Staff Involvement – Responses: 1 out of 2

Please tell us about how much time it takes to review the deliverable(s) you evaluate or coordinate.

I am lead for this deliverable	Total staff time required per CCO				
	< 30 minutes	0.5-2 hours	3-5 hours	6-10 hours	11+ hours
0 (0% of Q111 responses)	0 (0% of Q111 responses)	0 (0% of Q111 responses)	1 (100% of Q111 responses)	0 (0% of Q111 responses)	0 (0% of Q111 responses)

Deliverable 59: SHARE Spending Report [Ex. K, Sec. 8, Para. b (4)]

How many CCO staff members chose this deliverable? 18

Q5 Staff Involvement – Responses: 17 out of 18

I am lead for this deliverable	Requires help from other staff	Less than 5 total staff hours required	5 – 10 total staff hours required	10-15 total staff hours required	15+ total staff hours required
7 (41.18% of Q5 responses)	12 (70.59% of Q5 responses)	3 (17.65% of Q5 responses)	3 (17.65% of Q5 responses)	6 (35.29% of Q5 responses)	6 (35.29% of Q5 responses)

Q6 Issues – Responses: 7 out of 18

We DO NOT use the information for internal operations	The submission does not change year over year	Another deliverable asks for same info	Deliverable has inconvenient due date	Too many submissions required per year
3 (42.86% of Q6 responses)	1 (14.29% of Q6 responses)	4 (57.14% of Q6 responses)	2 (28.57% of Q6 responses)	2 (28.57% of Q6 responses)

Q8 Satisfaction 1 to 5 stars: 1.5 stars

Responses: 2 out of 18

Q9 How should OHA change this deliverable?

Responses: 2 out of 18

- Remove the deliverable: 1
- Don't change the deliverable: 1

Q10: What other feedback do you have about improving this deliverable?

Responses: 1 out of 18

- There are far too many financial reports that actually take the flexibility away from CCOs to help the community.

Deliverable 59: Continued from previous page

How many OHA staff chose this deliverable? 2

Q107 Primary purpose for deliverable submission to OHA – Responses: 2 out of 2

Document compliance	Share plans / future activities	Report performance for monitoring	Progress report for projects / programs	Inclusion in state / federal reporting	Identify designee / contacts
0 (0% of Q107 responses)	0 (0% of Q107 responses)	2 (100% of Q107 responses)	0 (0% of Q107 responses)	0 (0% of Q107 responses)	0 (0% of Q107 responses)

Q108 How submission information is used by OHA – Responses: 2 out of 2

Acknowledge receipt only	Evaluate / return results (Includes attestations)	Internal reporting	External reporting
0 (0% of Q108 responses)	2 (100% of Q108 responses)	2 (100% of Q108 responses)	1 (50% of Q108 responses)

Q109 Awareness of other OHA staff or units who use information from same deliverable?

Responses: 2 out of 2

- Yes: 1
- No: 1

Q110 Awareness of other Contract deliverables that ask for the same or similar information?

Responses: 2 out of 2

- Yes: 1
- No: 1

Q111 OHA Staff Involvement – Responses: 1 out of 2

Please tell us about how much time it takes to review the deliverable(s) you evaluate or coordinate.

I am lead for this deliverable	Total staff time required per CCO				
	< 30 minutes	0.5-2 hours	3-5 hours	6-10 hours	11+ hours
0 (0% of Q111 responses)	1 (100% of Q111 responses)	0 (0% of Q111 responses)	0 (0% of Q111 responses)	0 (0% of Q111 responses)	0 (0% of Q111 responses)

Deliverable 60: Health-Related Service Policies [Ex. K, Sec. 9, Para. E]

How many CCO staff members chose this deliverable? 24

Q5 Staff Involvement – Responses: 22 out of 24

I am lead for this deliverable	Requires help from other staff	Less than 5 total staff hours required	5 – 10 total staff hours required	10-15 total staff hours required	15+ total staff hours required
10 (45.45% of Q5 responses)	18 (81.82% of Q5 responses)	4 (18.18% of Q5 responses)	5 (22.73% of Q5 responses)	10 (45.45% of Q5 responses)	3 (13.64% of Q5 responses)

Q6 Issues – Responses: 8 out of 24

We DO NOT use the information for internal operations	The submission does not change year over year	Another deliverable asks for same info	Deliverable has inconvenient due date	Too many submissions required per year
0 (0% of Q6 responses)	7 (87.50% of Q6 responses)	0 (0% of Q6 responses)	2 (25% of Q6 responses)	0 (0% of Q6 responses)

Q8 Satisfaction 1 to 5 stars: 1 star

Responses: 1 out of 24

Q9 How should OHA change this deliverable?

Responses: 2 out of 24

- Attestation only: 1
- Change from scheduled to ad hoc: 1

Q10: What other feedback do you have about improving this deliverable?

Responses: 1 out of 24

- Once policies are approved by OHA with no additional evaluation findings, attestation only would suffice.

Deliverable 60: Continued from previous page

How many OHA staff chose this deliverable? 4

Q107 Primary purpose for deliverable submission to OHA – Responses: 4 out of 4

Document compliance	Share plans / future activities	Report performance for monitoring	Progress report for projects / programs	Inclusion in state / federal reporting	Identify designee / contacts
3 (75% of Q107 responses)	0 (0% of Q107 responses)	1 (25% of Q107 responses)	0 (0% of Q107 responses)	0 (0% of Q107 responses)	0 (0% of Q107 responses)

Q108 How submission information is used by OHA – Responses: 4 out of 4

Acknowledge receipt only	Evaluate / return results (Includes attestations)	Internal reporting	External reporting
0 (0% of Q108 responses)	4 (100% of Q108 responses)	2 (50% of Q108 responses)	1 (25% of Q108 responses)

Q109 Awareness of other OHA staff or units who use information from same deliverable?

Responses: 4 out of 4

- Yes: 3
- No: 1

Q110 Awareness of other Contract deliverables that ask for the same or similar information?

Responses: 4 out of 4

- Yes: 0
- No: 4

Q111 OHA Staff Involvement – Responses: 3 out of 4

Please tell us about how much time it takes to review the deliverable(s) you evaluate or coordinate.

I am lead for this deliverable	Total staff time required per CCO				
	< 30 minutes	0.5-2 hours	3-5 hours	6-10 hours	11+ hours
2 (66.67% of Q111 responses)	3 (100% of Q111 responses)	2 (66.67% of Q111 responses)	0 (0% of Q111 responses)	0 (0% of Q111 responses)	0 (0% of Q111 responses)

Deliverable 61: National Association of Insurance Commissioners (NAIC) A-D and F Forms [Ex. L, Sec. 3, Para. a (4)]

How many CCO staff members chose this deliverable? 9

Q5 Staff Involvement – Responses: 8 out of 9

I am lead for this deliverable	Requires help from other staff	Less than 5 total staff hours required	5 – 10 total staff hours required	10-15 total staff hours required	15+ total staff hours required
4 (50% of Q5 responses)	4 (50% of Q5 responses)	1 (12.50% of Q5 responses)	0 (0% of Q5 responses)	2 (25% of Q5 responses)	5 (62.50% of Q5 responses)

Q6 Issues – Responses: 6 out of 9

We DO NOT use the information for internal operations	The submission does not change year over year	Another deliverable asks for same info	Deliverable has inconvenient due date	Too many submissions required per year
2 (33.33% of Q6 responses)	2 (33.33% of Q6 responses)	3 (50% of Q6 responses)	1 (16.67% of Q6 responses)	2 (33.33% of Q6 responses)

Q8 Satisfaction 1 to 5 stars: 1.33 stars

Responses: 3 out of 9

Q9 How should OHA change this deliverable?

Responses: 3 out of 9

- Remove the deliverable: 2
- Combine with another deliverable: 1
 - Corporate Governance Annual Disclosure and/or Organizational Chart

Q10: What other feedback do you have about improving this deliverable?

Responses: 2 out of 9

- Remove deliverable. Exhibit L information is already provided in detail during ORCCO audits and NAIC filings.
- Perhaps I would have a different opinion if it was known what OHA uses this information for. These reports do not seem necessary.

Deliverable 62: Website posting with Behavioral Health and Substance Use Disorder Services educational information [Ex. M, Sec. 1, Para. G]

How many CCO staff members chose this deliverable? 9

Q5 Staff Involvement – Responses: 6 out of 9

I am lead for this deliverable	Requires help from other staff	Less than 5 total staff hours required	5 – 10 total staff hours required	10-15 total staff hours required	15+ total staff hours required
3 (50% of Q5 responses)	4 (66.67% of Q5 responses)	2 (33.33% of Q5 responses)	0 (0% of Q5 responses)	2 (33.33% of Q5 responses)	2 (33.33% of Q5 responses)

Q6 Issues – Responses: 3 out of 9

We DO NOT use the information for internal operations	The submission does not change year over year	Another deliverable asks for same info	Deliverable has inconvenient due date	Too many submissions required per year
1 (33.33% of Q6 responses)	0 (0% of Q6 responses)	0 (0% of Q6 responses)	1 (33.33% of Q6 responses)	1 (33.33% of Q6 responses)

Q8 Satisfaction 1 to 5 stars: 0 stars

Responses: 0 out of 9

Q9 How should OHA change this deliverable?

Responses: 0 out of 9

Q10: What other feedback do you have about improving this deliverable?

Responses: 0 out of 9

Deliverable 63: Annual Comprehensive Behavioral Health Plan update and progress report [Ex. M, Sec. 14, Para. B]

How many CCO staff members chose this deliverable? 18

Q5 Staff Involvement – Responses: 15 out of 18

I am lead for this deliverable	Requires help from other staff	Less than 5 total staff hours required	5 – 10 total staff hours required	10-15 total staff hours required	15+ total staff hours required
7 (46.67% of Q5 responses)	12 (80% of Q5 responses)	1 (6.67% of Q5 responses)	0 (0% of Q5 responses)	1 (6.67% of Q5 responses)	13 (86.67% of Q5 responses)

Q6 Issues – Responses: 12 out of 18

We DO NOT use the information for internal operations	The submission does not change year over year	Another deliverable asks for same info	Deliverable has inconvenient due date	Too many submissions required per year
2 (16.67% of Q6 responses)	0 (0% of Q6 responses)	9 (75% of Q6 responses)	3 (25% of Q6 responses)	2 (16.67% of Q6 responses)

Q8 Satisfaction 1 to 5 stars: 2.5 stars

Responses: 5 out of 18

Q9 How should OHA change this deliverable?

Responses: 5 out of 18

- Remove the deliverable: 1
- Combine with another deliverable: 3
 - CHA/CHIP
 - CHA and CHIP
 - The CBHP and CBHP Progress Report should be combined with the CHA/CHIP activities including keeping the timelines aligned
- None of the above: 1

Q10: What other feedback do you have about improving this deliverable?

Responses: 2 out of 18

- Integrating the CBHP with the CHA/CHIP process and reporting cycle would reduce administrative burden, improve visibility to community behavioral health priorities, and support more comprehensive integration of behavioral health.
- The CBHP has been a disaster of a process from the beginning. The original intent of this was to work with our LMHA/CMHPs and other community partners to have a coordinated a focused plan for BH in our county/region. We have convened our communities to assess the needs and develop capacity, even throughout a global pandemic, and HSD gives no feedback or has new people/no historical reference grade the plans only to tell us that they want to see more specific service delivery goals for our CCO. We have not received timely, knowledgeable or helpful feedback at any point of this deliverable. We would much rather focus on our CHA/CHIP that always includes extensive BH focus and community commitment to BH. We are also able to address these BH plans in TQS, QAPI, PIPs and Metrics and have successfully engage our communities in these processes as well. OHA is not providing any value

to this deliverable and is not using this deliverable in any meaningful way.

- Feedback for this deliverable was delayed.

How many OHA staff chose this deliverable? 2

Q107 Primary purpose for deliverable submission to OHA – Responses: 1 out of 2

Document compliance	Share plans / future activities	Report performance for monitoring	Progress report for projects / programs	Inclusion in state / federal reporting	Identify designee / contacts
0 (0% of Q107 responses)	0 (0% of Q107 responses)	0 (0% of Q107 responses)	1 (100% of Q107 responses)	0 (0% of Q107 responses)	0 (0% of Q107 responses)

Q108 How submission information is used by OHA – Responses: 1 out of 2

Acknowledge receipt only	Evaluate / return results (Includes attestations)	Internal reporting	External reporting
0 (0% of Q108 responses)	1 (100% of Q108 responses)	1 (100% of Q108 responses)	0 (0% of Q108 responses)

Q109 Awareness of other OHA staff or units who use information from same deliverable?

Responses: 1 out of 2

- Yes: 0
- No: 1

Q110 Awareness of other Contract deliverables that ask for the same or similar information?

Responses: 1 out of 2

- Yes: 1
- No: 0

Q111 OHA Staff Involvement – Responses: 1 out of 2

Please tell us about how much time it takes to review the deliverable(s) you evaluate or coordinate.

I am lead for this deliverable	Total staff time required per CCO				
	< 30 minutes	0.5-2 hours	3-5 hours	6-10 hours	11+ hours
0 (0% of Q111 responses)	1 (100% of Q111 responses)	0 (0% of Q111 responses)	0 (0% of Q111 responses)	0 (0% of Q111 responses)	0 (0% of Q111 responses)

Deliverable 64: Wraparound policies and procedures [Ex. M, Sec. 21, Para. M]

How many CCO staff members chose this deliverable? 18

Q5 Staff Involvement – Responses: 15 out of 18

I am lead for this deliverable	Requires help from other staff	Less than 5 total staff hours required	5 – 10 total staff hours required	10-15 total staff hours required	15+ total staff hours required
7 (46.67% of Q5 responses)	11 (73.33% of Q5 responses)	2 (13.33% of Q5 responses)	4 (26.67% of Q5 responses)	4 (26.67% of Q5 responses)	5 (33.33% of Q5 responses)

Q6 Issues – Responses: 10 out of 18

We DO NOT use the information for internal operations	The submission does not change year over year	Another deliverable asks for same info	Deliverable has inconvenient due date	Too many submissions required per year
1 (10% of Q6 responses)	5 (50% of Q6 responses)	1 (10% of Q6 responses)	2 (20% of Q6 responses)	4 (40% of Q6 responses)

Q8 Satisfaction 1 to 5 stars: 2 stars

Responses: 1 out of 18

Q9 How should OHA change this deliverable?

Responses: 2 out of 18

- Change from scheduled to ad hoc: 1
- Attestation only: 1

Q10: What other feedback do you have about improving this deliverable?

Responses: 2 out of 18

- I was lead on this deliverable and would get input from local Wrap teams to include in the P & P. The policy describes in detail what our Wrap programs are doing. In 2023, CareOregon is now lead for this deliverable though the local teams and I still contribute. Health Share delegates oversight of county Wrap programs to CareOregon. The P &P for Wrap includes criteria for both what the CCO will do and what the programs will do and sometimes that crossover of elements in one policy seemed confusing. Some of the criteria just require us to document that we will follow the OAR (or contract language), but since OAR are required both generally and in the contract, I'm not sure the benefit of having to restate the OAR in a policy (e.g., Criteria #4, though the policy is largely a restatement of OAR) . After multiple revisions, I definitely felt like I was a student trying to write a paper to please a teacher versus creating a guidance document to support program implementation. Criteria #7 and #8 about not having a waitlist are odd because waitlists are not allowed per the OAR. So, #7 says we can't have a waitlist, but #8 references a waitlist. The one part that felt useful was defining how we would review data and we are doing that regularly now (criteria #10). Since the Wrap programs are stable, information for this policy does not change often and we are not regularly reflecting upon this policy or reviewing it between submission dates.
- Once policies are approved by OHA with no additional evaluation findings, attestation only would suffice.

Deliverable 65: System of Care (SOC) policies and procedures [Ex. M, Sec. 21, Para. o (3-4)]

How many CCO staff members chose this deliverable? 25

Q5 Staff Involvement – Responses: 21 out of 25

I am lead for this deliverable	Requires help from other staff	Less than 5 total staff hours required	5 – 10 total staff hours required	10-15 total staff hours required	15+ total staff hours required
8 (38.10% of Q5 responses)	16 (76.19% of Q5 responses)	1 (4.76% of Q5 responses)	6 (28.57% of Q5 responses)	8 (38.10% of Q5 responses)	5 (23.81% of Q5 responses)

Q6 Issues – Responses: 10 out of 25

We DO NOT use the information for internal operations	The submission does not change year over year	Another deliverable asks for same info	Deliverable has inconvenient due date	Too many submissions required per year
2 (20% of Q6 responses)	5 (50% of Q6 responses)	1 (10% of Q6 responses)	1 (10% of Q6 responses)	4 (40% of Q6 responses)

Q8 Satisfaction 1 to 5 stars: 1.5 stars

Responses: 3 out of 25

Q9 How should OHA change this deliverable?

Responses: 4 out of 25

- Attestation only: 3
- Change from scheduled to ad hoc: 1

Q10: What other feedback do you have about improving this deliverable?

Responses: 2 out of 25

- Last year we were asked to submit corrections more than once for very minor language. An attestation would be sufficient not just for 1 year but for multiple years.
- Once policies are approved by OHA with no additional evaluation findings, attestation only would suffice.
- This was so frustrating: I was lead on this deliverable and had to submit it multiple times. It was reviewed by different persons at different times and criteria changed multiple times. Seriously, I think for ~4 drafts in a row there were different criteria to respond to each time. So, #1, be consistent in what is asked for and who is reviewing the document. By the time the rewrites were done, I was definitely just trying to write whatever it took to get the policy approved vs create a meaningful planning document. Also, System of Care is a committee structure - we are changing how we operate. It is not a fidelity program. The policy needs to be structured somehow differently than the P & P for fidelity programs like Wrap or benefit management. Knowing that our committees were hiring a consultant to make changes, I tried to submit an attestation, was told I could not because the criteria had changed again, and that if our policy did not show growth from year to year we would be put on corrective action plans. How could I document changes that hadn't been made yet? The policy is largely a restatement of contract language (or a description of my job duties) which does not feel useful. SOC is not reviewing this policy regularly. I hope to engage the committee structure with the policy in new ways moving forward so that we can describe what we are doing, but the current document was not useful. It seems like it would be more useful to submit a System of Care "report" each year where we can describe operations, successes,

Deliverable 66: Bi-Annual Reports for SOC Statewide Steering Committee [Ex. M, Sec. 21, Paragraph (5)]

How many CCO staff members chose this deliverable? 15

Q5 Staff Involvement – Responses: 12 out of 15

I am lead for this deliverable	Requires help from other staff	Less than 5 total staff hours required	5 – 10 total staff hours required	10-15 total staff hours required	15+ total staff hours required
7 (58.33% of Q5 responses)	9 (75% of Q5 responses)	2 (16.67% of Q5 responses)	4 (33.33% of Q5 responses)	3 (25% of Q5 responses)	3 (25% of Q5 responses)

Q6 Issues – Responses: 7 out of 15

We DO NOT use the information for internal operations	The submission does not change year over year	Another deliverable asks for same info	Deliverable has inconvenient due date	Too many submissions required per year
5 (71.43% of Q6 responses)	0 (0% of Q6 responses)	1 (14.29% of Q6 responses)	0 (0% of Q6 responses)	2 (28.57% of Q6 responses)

Q8 Satisfaction 1 to 5 stars: 3 stars

Responses: 1 out of 15

Q9 How should OHA change this deliverable?

Responses: 1 out of 15

- Change the format: 1

Q10: What other feedback do you have about improving this deliverable?

Responses: 1 out of 15

- This deliverable is easy to pull together. It is a simple spreadsheet. There are two CCO in my region and we collaborate for System of Care. Only I have access to the data for this deliverable. So, I basically create the report and send it to the other CCO to put their own name on it. It is just busy work duplication. It would be nice if we could submit one for our System of Care region. The information asked for on this form allows for basic tracking and trending of service barriers, which is interesting, but I don't find it to be useful for our SOC at this point. I think the form could be redesigned to allow for easier trending of variables (e.g., supply high level categories in a pull down menu vs. just pasting in detailed descriptions). This is an easy report to send in but just feels like busy work though admittedly the state council is starting to track/trend some of this data.

Deliverable 67: IIBHT report on referrals, public communication, and provider capacity building [Ex. M, Sec. 22, Para. a (4)]

How many CCO staff members chose this deliverable? 15

Q5 Staff Involvement – Responses: 12 out of 15

I am lead for this deliverable	Requires help from other staff	Less than 5 total staff hours required	5 – 10 total staff hours required	10-15 total staff hours required	15+ total staff hours required
6 (50% of Q5 responses)	10 (83.33% of Q5 responses)	1 (8.33% of Q5 responses)	3 (25% of Q5 responses)	3 (25% of Q5 responses)	5 (41.67% of Q5 responses)

Q6 Issues – Responses: 8 out of 15

We DO NOT use the information for internal operations	The submission does not change year over year	Another deliverable asks for same info	Deliverable has inconvenient due date	Too many submissions required per year
6 (75% of Q6 responses)	0 (0% of Q6 responses)	1 (12.50% of Q6 responses)	0 (0% of Q6 responses)	3 (37.50% of Q6 responses)

Q8 Satisfaction 1 to 5 stars: 1 star

Responses: 3 out of 15

Q9 How should OHA change this deliverable?

Responses: 3 out of 15

- Remove the deliverable: 2
- Combine with another deliverable: 1
 - Annual Behavioral Health Report

Q10: What other feedback do you have about improving this deliverable?

Responses: 3 out of 15

- CCO and IIBHT providers must collaborate to complete and successfully de-identify all members and obtain information on PRTF denials at the provider level. OHA requires information on all referrals to PRTF, and CCOs cannot collect this information without individual providers sharing this data (which they have historically never collected or tracked). Recommend revising deadline cadence. Alternatively, moving requested information to annual behavioral health report, or integrating data that IIBHT providers possess (program referrals and outcomes) into RedCAP system.
- It seems to me the state already has this information and also asks for this report directly from CMHPs
- Reporting requirement appears to be mostly driven by concern that the IIBHT is not functioning as was desired. The report is not additive or beneficial.

Deliverable 68: Annual Behavioral Health Report [Ex. M, Sec. 23, Para. A]

How many CCO staff members chose this deliverable? 17

Q5 Staff Involvement – Responses: 14 out of 17

I am lead for this deliverable	Requires help from other staff	Less than 5 total staff hours required	5 – 10 total staff hours required	10-15 total staff hours required	15+ total staff hours required
7 (50% of Q5 responses)	12 (85.71% of Q5 responses)	0 (0% of Q5 responses)	0 (0% of Q5 responses)	2 (14.29% of Q5 responses)	12 (85.71% of Q5 responses)

Q6 Issues – Responses: 10 out of 17

We DO NOT use the information for internal operations	The submission does not change year over year	Another deliverable asks for same info	Deliverable has inconvenient due date	Too many submissions required per year
7 (70% of Q6 responses)	0 (0% of Q6 responses)	3 (30% of Q6 responses)	1 (10% of Q6 responses)	0 (0% of Q6 responses)

Q8 Satisfaction 1 to 5 stars: 1.33 stars

Responses: 4 out of 17

Q9 How should OHA change this deliverable?

Responses: 4 out of 17

- Remove the deliverable: 3
- None of the above: 1

Q10: What other feedback do you have about improving this deliverable?

Responses: 3 out of 17

- The Annual BH Report should be removed from the contract. The annual BH Report is not a valuable document/exercise. The Comp BH Plan assessment is a more valuable activity.
- I picked an arbitrary answer on number six due to the answers not being applicable in most cases. The issue with the deliverables is the volume and due dates. When there are many complex deliverables due at the same time it becomes exhausting. Give us a tough deliverable with a bunch of easier ones. Spread out the pain so it is not draining the staff. A great example of this is the number of Behavioral Health Directors that left the CCOs and mostly due to the number of deliverables with the complexity being unrelenting. As you can imagine, CCOs do not have as many staff as there are deliverables in numbers to spread out the intense nature of the requests. As an organization, we pride ourselves on being agile and really have our finger on the pulse of our community, the work, our mission and why we do what we do. The deliverables detract from that at times. When you look at the volume of reports, the number of people it takes to collaborate, the number of hours it takes to produce we have to ask ourselves if this is helping to improve the outcomes or what the value is when it is not readily shared. There are meaningful reports that go out and CCOs really want to hear the feedback so we can improve but then we get nothing for sometimes a year, which is not helping progress. Another area we can describe is that when the OHA changes the process every single year, we do not know the value of that change and a baseline is impossible to measure. When we have received feedback multiple times on a deliverable, and we ask for TA so we can be clear on what the OHA is looking for it feels as though we cannot get a clear answer or the staff is afraid to give us clear guidance like we might be cheating on a test. I understand we have asked for at least 90 days when a template changes, if the data being requested is NEW then 90 days will not be sufficient to capture a year's worth of information when we

have focused on the previous guidance. Overall, I think we can be helpful to one another if we went into this as partners. If the OHA has specific information that they must report on, let's be sure that is communicated first. If it is information the OHA believes is valuable for oversight, let us partner in what may help you more. No one is trying to diminish the value of great reporting; however, it needs to be actionable information to bring value. If we are reporting just so the OHA has oversight, let's be thoughtful about what can help both of us improve our outcomes. It would also be helpful if the OHA had the same requirements on the FFS population so the entire population with coverage was measured equitably.

- Most of the data that we have to submit in this report is already looked at internally on a regular basis via utilization management and reporting. The PA information is also duplicative of MH Parity and NOABD/A&G processes. The Wraparound info is duplicative of the fidelity reporting already submitted to OHA by Wraparound programs. CCOs also have access to the Wraparound reporting system and monitor it. Lastly, the PRTS information is duplicative of the IIBHT quarterly report. The report is not useful to CCOs, especially since OHA does not populate their portions and give us that data anymore. There are no benchmarks/standards for utilization for many of these services so we only have to guess if/how much to increase services. OHA gets all of this data via our claims submissions and can do utilization reporting in a more comprehensive and statewide approach.

Deliverable 69: Mental Health Parity analysis documentation [Ex. M, Sec. 25, Para. B]**How many CCO staff members chose this deliverable? 22****Q5 Staff Involvement** – Responses: 19 out of 22

I am lead for this deliverable	Requires help from other staff	Less than 5 total staff hours required	5 – 10 total staff hours required	10-15 total staff hours required	15+ total staff hours required
7 (36.84% of Q5 responses)	16 (84.12% of Q5 responses)	0 (0% of Q5 responses)	2 (10.53% of Q5 responses)	4 (21.05% of Q5 responses)	13 (68.42% of Q5 responses)

Q6 Issues – Responses: 9 out of 22

We DO NOT use the information for internal operations	The submission does not change year over year	Another deliverable asks for same info	Deliverable has inconvenient due date	Too many submissions required per year
3 (33.33% of Q6 responses)	2 (22.22% of Q6 responses)	4 (44.44% of Q6 responses)	3 (33.33% of Q6 responses)	0 (0% of Q6 responses)

Q8 Satisfaction 1 to 5 stars: 2 stars

Responses: 2 out of 22

Q9 How should OHA change this deliverable?

Responses: 3 out of 22

- Remove the deliverable: 1
- Attestation only: 2

Q10: What other feedback do you have about improving this deliverable?

Responses: 0 out of 22

Deliverable 69: Continued from previous page

How many OHA staff chose this deliverable? 2

Q107 Primary purpose for deliverable submission to OHA – Responses: 1 out of 2

Document compliance	Share plans / future activities	Report performance for monitoring	Progress report for projects / programs	Inclusion in state / federal reporting	Identify designee / contacts
0 (0% of Q107 responses)	0 (0% of Q107 responses)	0 (0% of Q107 responses)	0 (0% of Q107 responses)	1 (100% of Q107 responses)	0 (0% of Q107 responses)

Q108 How submission information is used by OHA – Responses: 1 out of 2

Acknowledge receipt only	Evaluate / return results (Includes attestations)	Internal reporting	External reporting
0 (0% of Q108 responses)	1 (100% of Q108 responses)	0 (0% of Q108 responses)	1 (100% of Q108 responses)

Q109 Awareness of other OHA staff or units who use information from same deliverable?

Responses: 1 out of 2

- Yes: 0
- No: 1

Q110 Awareness of other Contract deliverables that ask for the same or similar information?

Responses: 1 out of 2

- Yes: 0
- No: 1

Q111 OHA Staff Involvement – Responses: 1 out of 2

Please tell us about how much time it takes to review the deliverable(s) you evaluate or coordinate.

I am lead for this deliverable	Total staff time required per CCO				
	< 30 minutes	0.5-2 hours	3-5 hours	6-10 hours	11+ hours
1 (100% of Q111 responses)	0 (100% of Q111 responses)	0 (0% of Q111 responses)	0 (0% of Q111 responses)	0 (0% of Q111 responses)	0 (0% of Q111 responses)

Deliverable 70: Behavioral Health Policies and Procedures [Ex. M, Sec. 4]

How many CCO staff members chose this deliverable? 20

Q5 Staff Involvement – Responses: 16 out of 20

I am lead for this deliverable	Requires help from other staff	Less than 5 total staff hours required	5 – 10 total staff hours required	10-15 total staff hours required	15+ total staff hours required
6 (37.50% of Q5 responses)	10 (62.50% of Q5 responses)	1 (6.25% of Q5 responses)	2 (12.50% of Q5 responses)	1 (6.25% of Q5 responses)	11 (68.75% of Q5 responses)

Q6 Issues – Responses: 8 out of 20

We DO NOT use the information for internal operations	The submission does not change year over year	Another deliverable asks for same info	Deliverable has inconvenient due date	Too many submissions required per year
1 (12.50% of Q6 responses)	4 (50% of Q6 responses)	2 (25% of Q6 responses)	2 (25% of Q6 responses)	3 (37.50% of Q6 responses)

Q8 Satisfaction 1 to 5 stars: 2.66 stars

Responses: 3 out of 20

Q9 How should OHA change this deliverable?

Responses: 4 out of 20

- Remove the deliverable: 2
- Change from scheduled to ad hoc: 1
- Attestation only: 1
- None of the above: 1

Q10: What other feedback do you have about improving this deliverable?

Responses: 3 out of 20

- The volume and depth of BH P&Ps is not necessary, is duplicative for CMHPs/BH providers and the level of detail is not useful to CCOs. Most of them are written exactly to the 309 Oars, which is direct BH services delivery rules and CCOs are not direct service providers. Our BH P&Ps should be focused more on that we have oversight of direct providers. ACT, Wraparound, Supported Employment, etc are fidelity programs that have numerous other tracking mechanisms and a detailed CCO P&P is burdensome on the CCO and providers. You could roll up so many of these BH P&Ps into a small handful that could be very useful to us and to our providers. There should be one BH service delivery P&P that goes into detail about CCO expectations, standards and our procedures. Not re quoting OARs.
- Once policies are approved by OHA with no additional evaluation findings, attestation only would suffice.
- We have multiple BH P&P and several deliverables for this department are due 1/31. Attestation would be valuable for more than 1 year at a time.
- All Behavioral Health Policies (including System of Care, ICC, wraparound) are due January 31st. It would be beneficial to stagger policy deadlines, due to the extensive system transformation each year, and proximity of CCO contract finalization (typically leaving 31-45 days to revise and submit all policies).

CONCLUSION

The survey results contain valuable insight about the current state of Contract Deliverables and the potential changes OHA can make to streamline the process. Applicable comments and suggestions will be incorporated into the Contract Deliverables process when appropriate.

Survey data will be shared for transparency and to ensure any insights captured are available to plans, partners, and other stakeholders.

Thank you to all respondents, workgroup participants, and stakeholders who made this project possible.

