

Note: This summary of updates is not meant to be a substitute for reviewing the full guidance documents, which include all TQS requirements.

January 27, 2023

FAQ updates

1. New question 19: How in-depth should the QAPI impact analysis in Section 3 be?
2. New question 42: Are CCOs required to include data analysis of all elements (race, ethnicity, language and disability) of REALD on every project?
3. New question 43: Do CCOs need to use the disaggregated race and ethnicity stratifications? May CCOs roll up into the “parent” or intermediate categories?

November 23, 2022

Example strategy updates

Incorporated race, ethnicity, language and disability (REALD) and sexual orientation and gender identity (SOGI) data requirements into all example strategies that use member-level data.

November 7, 2022

FAQ updates

1. New question 40: When will the REALD/SOGI flat files be available to CCOs?
2. New question 41: Can we repeat Section 1C (component prior year assessment) if multiple projects address the same component?
3. New question 42: Will CCOs be notified about whether they need to submit a project for PCPCH member enrollment?
4. New question 43: For the PCPCH: member enrollment component, can CCOs use self-reported data to determine whether the CCO met the threshold?
1. New question 44: For the PCPCH: member enrollment component, what happens if a CCO falls below the threshold? Will they have to start up a project again, and when is that calculated/validated?

September 30, 2022

Template updates

1. Added check box to indicate whether Utilization Review projects are also being submitted for MEPP reporting.
2. Updated required Section 3 quality program attachments to better align with Quality Assurance and Performance Improvement (QAPI) program.

Guidance document

1. Removed all three access components from the TQS.
2. Added requirement to use REALD (race, ethnicity, language and disability) and SOGI (sexual orientation and gender identity) data for identifying and addressing disparities in all projects. The REALD requirement applies to all member-level data used in the TQS.
3. Added clarification for when to check “yes” for the health information technology check box.
4. Added requirement to define the population for interventions, with encouragement to focus on prioritized populations (members eligible for intensive care coordination, populations identified in the state health improvement plan, or communities identified as having disparities).
5. Added guidance for using SMARTIE goals — SMART goals that are inclusive and equitable (encouraged, not required).
6. Clarified guidance on what to include in Section 1C: component prior year assessment.
7. Clarified must-pass submission criteria (use current year template, address all components, update targets and benchmarks for current year).

8. Changed post-written assessment feedback call from being optional to required for all CCOs.
9. Added a required check-in with OHA CCO Operations Quality Assurance and Contract Oversight Team if CCO earns score of 70% or less of points possible. The purpose of the call is to discuss potential barriers from a compliance perspective and the CCO's plan to address those barriers.
10. Moved all Medicaid Efficiency and Performance Program (MEPP) reporting into the TQS within the utilization review component. All CCOs are now required to report on MEPP through TQS. Added MEPP-specific guidance.
11. PCPCH-Member Enrollment: Added threshold — projects for this component will not be required for CCOs with at least 85% of members already enrolled in PCPCHs.
12. Special Health Care Needs: Clarified guidance; added criterion for Full Benefit Dual Eligible (FBDE) component to collaborate with affiliated Medicare Advantage plan.
13. CLAS: Expanded requirements for describing how project is transformative, measures quality improvement, and advances quality care.
14. Health Equity: Cultural Responsiveness: Updated criteria and guidance to move projects from basic infrastructure to quality improvement and transformation.
15. Social Determinants of Health and Equity: Clarified guidance for SDOH-E projects that are community-led efforts.
16. Updated Section 3 requirements for quality program attachments to better align with Quality Assurance and Performance Improvement (QAPI) program.

Scoring criteria updates

1. Added SCHN-Full Benefit Dual criterion to collaborate with affiliated Medicare Advantage plan.
2. Added CLAS criteria for describing how the project is transformative, measures quality improvement, and advances quality care.
3. Added Health Equity: Data criterion to identify goals that are inclusive and equitable.
4. Added requirements for "Detail" scoring: use REALD and define the population.

Example strategies updates

1. Added example strategy for utilization review that includes MEPP reporting.
2. Added example strategy for behavioral health integration focused on metabolic screening for patients with serious mental illness on psychotropic medications.

FAQ updates

1. New question #10: Why were the Access components removed from the TQS? How will access work be reported instead?
2. Updated question #13: When we report on our Medicaid Efficiency and Performance Program (MEPP) through TQS, do we submit the three MEPP episodes of care in one or separate TQS projects?
3. Updated question #14: How should 2022 discontinued MEPP interventions be reported?
4. Updated question #16: What's the difference between SDOH-E reporting in TQS compared to the SHARE Initiative spending plan?
5. Updated question #19: What changes were made to the TQS for 2023?
6. New question #39: Who are considered priority populations?

Project ID # list

1. Updated list to include project ID numbers for new projects from 2022.