

<p style="text-align: center;">CCO Year Four Data Proposal Review</p>	<p>CCO NAME Review completed on: Review completed by: Data Proposal Approved? <input type="checkbox"/> Yes <input type="checkbox"/> No</p>	
<p style="text-align: center;">Data Submission Requirements</p>	<p style="text-align: center;">Complete</p>	<p style="text-align: center;">Reviewer Notes</p>
<p>Was submission received by the deadline?</p>	<input type="checkbox"/>	<p>Yes; submission was received on DATE.</p>
<p>Was data received in the appropriate format, using the <i>Year Four Data Proposal Template</i>?</p>	<input type="checkbox"/>	
<p>Are all tabs and all fields in the Year Four Data Proposal complete?</p>	<input type="checkbox"/>	
<p>Are member counts provided in the Year Four Data Proposal current as of November 2016?</p>	<input type="checkbox"/>	
<p>Based on the member counts provided, will the required population threshold be met for all measures?</p>	<input type="checkbox"/>	
<p>Will all practices in the data submission submit data for the entire calendar year of 2016? If not, is appropriate exclusion rationale provided?</p>	<input type="checkbox"/>	
<p>Are all practices from the Year Three Data Submissions included? If not, is appropriate exclusion rationale provided?</p>	<input type="checkbox"/>	
<p>Are any non-primary care providers, such as dental practices, included in the proposal? If so, was this proposed approach discussed with OHA in advance of the proposal? Has an appropriate reason for inclusion been provided?</p>	<input type="checkbox"/>	

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<p>Are all primary care providers at each organization/practice included in the data submission? If not, is appropriate exclusion rationale provided?</p>	<p align="center"><input type="checkbox"/></p>	
<p>For each practice identified in the Data Proposal as submitting data for NQF 0418 Screening for Clinical Depression and Follow-up Plan via a custom query, has additional detail been provided regarding the data elements used for reporting? Do the data elements align with the required specifications?</p>	<p align="center"><input type="checkbox"/></p>	
<p>For each practice identified in the Data Proposal as submitting data for the Cigarette Smoking Prevalence measure, has additional detail been provided regarding the data elements used for reporting? Do the data elements align with the required specifications?</p>	<p align="center"><input type="checkbox"/></p>	
<p>Does the Data Proposal identify the practice(s) that will submit test patient-level data? Will the CCO report test data on each measure?</p>	<p align="center"><input type="checkbox"/></p>	
<p>Does the Data Proposal demonstrate that the practice(s) that will submit test patient-level data for a measure will submit CCO Medicaid only data for that measure?</p>	<p align="center"><input type="checkbox"/></p>	
<p>Overall comments on data proposal:</p>		