

# Baseline Health Plan Proficiency (360°) ACO and Data Exchange Performance Scorecard

## Scorecard Template and Weights

Item	Points
<b>Accountable care and data agreements executed</b>	5
<b>Data elements</b> <ul style="list-style-type: none"> <li>• Health Plan to provide: <ul style="list-style-type: none"> <li>○ Member Roster</li> <li>○ Claims data</li> <li>○ Total Cost of Care – summary and detail reports</li> </ul> </li> <li>• AHARO Member to provide: <ul style="list-style-type: none"> <li>○ EHR data to meet HEDIS and Medicare Star metrics</li> <li>○ SDOH data</li> </ul> </li> <li>• Data provided as agreed to</li> <li>• Quality and accuracy of the data provided</li> </ul>	30
<b>Additional key data fields</b> <ul style="list-style-type: none"> <li>• Agreement on key or important data fields</li> <li>• Key data fields provided as agreed to</li> <li>• Health Plan to provide: <ul style="list-style-type: none"> <li>○ Member Roster: Medicaid assignment, Health Plan enrollment, and PCP assignment dates</li> <li>○ Claims: Outside provider or facility name and Paid claims amount</li> </ul> </li> <li>• AHARO Member to provide: <ul style="list-style-type: none"> <li>○ All required EHR data fields to satisfy HEDIS and Star metrics reporting requirements</li> <li>○ All agreed to data fields to satisfy grant application and reporting</li> </ul> </li> </ul>	20
<b>Data transfer</b> <ul style="list-style-type: none"> <li>• Frequency of updates <ul style="list-style-type: none"> <li>○ Health Plan to provide: Member Roster and Claims data minimum monthly, Total Cost of Care minimum quarterly</li> <li>○ AHARO Member to provider: EHR data for HEDIS and Star metrics minimum quarterly, SDOH data as agreed to</li> </ul> </li> <li>• Timeliness of updates: for monthly and quarterly data feeds, data should be provided in the following month</li> <li>• Data format as agreed to or in an acceptable format</li> <li>• Data transfer method as agreed to and is secure (encrypted for PHI or confidential information and requiring authentication to access)</li> </ul>	10
<b>Accountable care measures</b> <ul style="list-style-type: none"> <li>• Agreement on baseline period</li> <li>• Agreement on calculation and identification of codes</li> <li>• Timeliness and quality of measures</li> </ul>	10
<b>High risk cohort</b> <ul style="list-style-type: none"> <li>• Agreement on identification methodology</li> <li>• Data transfer format and method – if necessary and separate from other data items</li> <li>• Cohort validated</li> </ul>	10
<b>Ongoing engagement and assistance</b> <ul style="list-style-type: none"> <li>• Point of contact(s) identified</li> <li>• Minimum quarterly meetings to discuss ACO and financial risk pool reports</li> <li>• Ongoing validation support</li> <li>• Technical assistance and collaborative participation to perform, and meet deliverables' timeline</li> </ul>	15
<b>Total score</b>	100