

**Attachment I: Part C Reporting Overview**

Measure	Type Plans Required to Report	Report Freq./ Level	Report Period (s)	Data Due date (s)
1. Benefit Utilization	CCP, PFFS, Demo, MSA, SNPs (includes all 800 series plans), Employer/Union Direct Contract	1/year PBP	1/1-12/31	8/31 of the following year.
2. Procedure Frequency	CCP, PFFS, Demo, MSA (includes all 800 series plans) , Employer/Union Direct Contract	1/year Contract	1/1-12/31	5/31 of following year
3. Serious Reportable Adverse Events	CCP, PFFS, Demo, MSA (includes all 800 series plans) , Employer/Union Direct Contract	1/year Contract	1/1-12/31	5/31 of following year
4. Provider Network Adequacy	CCP, 1876 Cost, Demo (includes all 800 series plans)	1/year Contract	1/1 - 12/31	2/28 of following year
5. Grievances	CCP, PFFS, 1876 Cost, Demo, MSA (includes all 800 series plans) , Employer/Union Direct Contract	4/Year Contract	1/1-3/31 4/1-6/30 7/1-9/30 10/1-12/31	5/31 8/31 11/30 2/28 of following year
6. Organization Determinations/ Reconsiderations	CCP, PFFS, 1876 Cost, Demo, MSA (includes all 800 series plans) , Employer/Union Direct Contract	4/Year Contract	1/1-3/31 4/1-6/30 7/1-9/30 10/1-12/31	5/31 8/31 11/30 2/28 of following year
7. Employer Group Plan Sponsors	CCP, PFFS, 1876 Cost, Demo, MSA (includes sponsors of individual plans and 800 series plans)	2/year PBP	1/1 -6/30 7/1-12/31	8/31 2/28 of following year
8. PFFS Plan Enrollment Verification Calls	PFFS	1/year PBP	1/1-12/31	2/28 of following year
9. PFFS Provider Payment Dispute Resolution Process	PFFS (includes all 800 series plans) , Employer/Union Direct Contract	1/year PBP	1/1-12/31	2/28 of following year
10. Agent Commission Structure	CCP, PFFS, 1876 Cost, Demo, MSA (includes all 800 series plans)	1/year Contract	1/1-12/31	2/28 of following year
11. Agent Training	CCP, PFFS, 1876 Cost,	1/year	1/1-12/31	2/28 of following year

and Testing	Demo, MSA	Contract		
12. Plan Oversight of Agents	CCP, PFFS, 1876 Cost, Demo, MSA (includes all 800 series plans)	4/Year Contract	1/1-3/31 4/1-6/30 7/1-9/30 10/1-12/31	5/31 8/31 11/30 2/28 of following year
13. SNPS Care Management	SNPs (includes all 800 series plans)	1/Year/PBP	1/1-12/31	5/31 of following year

Note: For #4, Employer/Union Direct Contracts are not included since they currently only offer PFFS plans. If, at a later date, PFFS plans are required to report on this measure and/or Direct Contracts are allowed to offer other kinds of MA plans, they should be required to report on this measure as well.