

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, SNPs , 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, SNPs , 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, SNPs , 1876 Cost, Demo (includes all 800 series plans)	1/year Contract	1/1 - 12/31	2/28 of following year
5. Grievances	CCP, SNPs , PFFS, 1876 Cost, Demo, MSA (includes all 800 series plans) , Employer/Union Direct Contract	4/Year Contract PBP	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, SNP , 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, SNPs , 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 Compensation	CCP, SNPs , PFFS, 1876 Cost, Demo, MSA (includes all 800 series	1/year Contract	1/1-12/31	2/28 of following year

Structure	plans)			
11. Agent Training and Testing	CCP, SNPs , PFFS, 1876 Cost, Demo, MSA	1/year Contract	1/1-12/31	2/28 of following year
12. Plan Oversight of Agents	CCP, SNPs , 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. [Note that SNPs are coordinated care plans \(CCPs\). Therefore, SNPs data will be reported at the contract level when CCPs are reporting at that level and at the PBP level when CCPs are reporting at that level.](#)