QIS Progress Report Form
Submission date (please indicate the date you are submitting this QIS form via HIOS or SERFF)
Use this form to report on progress made during the previous year of your quality improvement strategy (QIS). Please refer to your baseline QIS Implementation Plan and any subsequent modifications for baseline data.
Confirm you have reviewed your baseline QIS Implementation Plan (and associated Modification Summary Supplement, if applicable) in preparing this submission.
For detailed instructions, please refer to the Quality Improvement Strategy: Technical Guidance and User Guide for the current plan year on the Marketplace Quality Initiatives website.
PLEASE NOTE: Both issuers who are CONTINUING or DISCONTINUING a QIS need to submit a Progress Report form. There are two scenarios for issuers:
 Progress Report: Issuers who are continuing their current QIS (with or without modifications) should select Progress Report to report on progress made during the previous year of your QIS.
 Progress Report Closeout Form: Issuers discontinuing their current QIS and implementing a new one should select Progress Report Closeout Form and submit the Progress Report form to close out the discontinued QIS. These issuers should also describe the QIS that will be in place for the 2025 Plan Year by submitting a QIS Implementation Plan for the new QIS.
For CMS Use Only

QIS Submission Type

Part A. Progress Report or Closeout QIS Submission

These fields are required but will not be scored as part of the QIS evaluation.

1. Type of QIS Submission

Type of QIS

Select the option that describes the type of QIS submission and follow the instructions to complete the submission.

Instructions

() Progress Report	│ Issuers must complete one¹ form:
	Complete the Background Information section (Parts A and B), and the Progress Report Summary section (Part C) of the Progress Report form to report progress on your baseline QIS.
Progress Report Closeout Form	 Issuers must complete 2 forms: Complete the Background Information section (Parts A and B) and the Progress Report Summary section (Part C) of the Progress Report form to close out the discontinued QIS, reporting on progress up until the strategy was discontinued. Complete a new Implementation Plan form. See instructions in the QIS Implementation Plan form: New QIS after Discontinuing a QIS Submitted During a Prior QHP Application Period.
QIS Title Restate the short title for the QIS b	peing reported on. (200-character limit)

¹ If continuing with modifications, issuers must also complete a Modification Summary Supplement form. See instructions in the OIS Modification Summary Supplement form: Continuing a OIS with Modifications.

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Background Information

Part B. Issuer Information

These fields are required but will not be scored as part of the QIS evaluation. Issuers may update the information in Part B from year to year, as needed.

2. 	Issuer Legal Name	3.	Company Legal Name	
4.	HIOS Issuer ID	5.	Issuer State	
6.	QIS Primary Contact's First Name		QIS Primary Contact's Last Name	
7. 	QIS Primary Contact's Title	8.	QIS Primary Contact's Phone	Ext.
9. (QIS Primary Contact's Email			
10.	. QIS Secondary Contact's First Name		QIS Secondary Contact's Last Nar	ne
11.	. QIS Secondary Contact's Title	12	QIS Secondary Contact's Phone	Ext.
13. 	. QIS Secondary Contact's Email			
14.	. Date Issuer Began Offering Coverage Thro	ugh th	ne Exchange	
			s in this form, use the down arrow key use the mouse or arrow keys to naviga	

15. Current Payment Model(s) Description

Select the category(ies) of payment models that are used by the issuer across its Exchange product line. Provide the percentage of payments in each payment model category² used by the issuer across its Exchange product line. The total percentage of payments across all four payment model types should equal approximately 100 percent.3

Note: These percentages can be estimates and do not need to be exact figures. Issuers may update this information year to year, as needed.

Payment Model Type	Payment Model Description	Provide Percentage
Fee for Service – No Link to Quality and Value	Payments are based on volume of services and not linked to quality or efficiency.	%
Fee for Service – Linked to Quality and Value	At least a portion of payments vary based on the quality or efficiency of health care delivery.	%
Alternative Payment Models Built on Fee for Service Architecture	Some payment is linked to the effective management of a segment of the population or an episode of care. Payments are still triggered by delivery of services, but there are opportunities for shared savings or two-sided risk.	%
Population-based Payment	Payment is not directly triggered by service delivery, so payment is not linked to volume. Clinicians and organizations are paid and responsible for the care of a beneficiary for a long period (e.g., more than one year).	%
Total	Please confirm the total percentage of payments across all four payment model type categories equals approximately 100%.	%

² Categories of payment models are defined in the Alternative Payment Model Framework and Progress Tracking (APM FPT) Work Group - Alternative Payment Model (APM) Framework Final White Paper, available at: https://hcplan.org/workproducts/apm-whitepaper.pdf. See the QIS Technical Guidance and User Guide for the current plan year, available on the Marketplace Quality Initiatives website, for examples of payment models within each category. ³ To calculate the percentage of payments for Fee for Service payments linked to quality or value, and/or Alternative Payment Models tied to quality or value, issuers should use the calculation methodologies defined in the Measuring Progress: Adoption of Alternative Payment Models in Commercial, Medicare Advantage, and State Medicaid Programs (APM Measurement Effort) Final Paper, available at: https://hcp-lan.org/groups/apm-fpt/apm-report/. See Table 1 (p. 7-10) for instructions to calculate the percentage of payments for these two payment model categories.

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0938-1286. This information collection is mandatory for issuers applying for QHP certification in applicable Exchanges that meet the QIS participation criteria, in accordance with section 1311(g) of the PPACA. CMS will assess responses for completeness, evaluate them against QIS requirements, and confidentially report results to issuers. The time required to complete this information collection is estimated to average 18 hours per response, including the time to review instructions, search existing data resources, gather the data needed, to review and complete the information collection. The information will remain confidential to the extent permitted by law. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: CMS, 7500 Security Boulevard, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850 Attn: PRA Reports Clearance Officer.

QIS Progress Report Section

Part C. QIS Progress Report Summary

The Elements in Part C will be scored as part of the QIS evaluation.

Note: The Goal(s) and Measure(s) identified in this section (Part C: Progress Report Summary) are the Goal(s) and Measure(s) from the Implementation Plan form (and associated Modification Summary Supplement, if applicable) on file against which QIS progress is measured.

Note: All references to Implementation Plan form elements and criteria in this form refer to the Implementation Plan form (and associated Modification Summary Supplement, if applicable) on file.

Note: Please make sure to correctly restate the values and information from the most recent Implementation Plan on file and/or the Modification Summary Supplement on file, when applicable.

16. Analyze Progress Using Baseline Data, as Documented in the Implementation Plan (Must Pass)

Restate Goal 1 identified in the Implementation Plan or the Modification Summary Supplement on file, if applicable.

QIS (Goal 1:
(500	character limit)
Meas	sure 1a:
16a.	Restate Measure 1a name from the Implementation Plan or the Modification Summary Supplement on file, if applicable:
	If this a consensus-based entity (CBE)-endorsed measure, ⁴ please provide the 4-digit CBE-ID number:

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⁴ The CBE sets measure evaluation criteria through experts and multi-stakeholder groups involved in the evaluation process. For further details regarding CBE endorsed quality measures, please visit the CBE measure database (http://www.p4qm.org/measures).

16b. Baseline Assessment: Restate the baseline results from the Implementation Plan or the Modification Summary Supplement on file, if applicable, by **either**:

Calculating the rate and providing the associated numerator and denominator:

	(Note: The numerator and denominator should calculate to the rate provided.)
	Calculated Rate:
	Numerator:
	Denominator:
	- OR -
	Indicating the data point if the measure is not a rate:
	Data Point: -
16c.	Provide the baseline performance period (i.e., month and year when data collection began and ended) covered by the baseline assessment provided in the Implementation Plan or the Modification Summary Supplement on file, if applicable:
16d.	Provide the Progress Report results by either:
	 Calculating the rate and providing the associated numerator and denominator: (Note: The numerator and denominator should calculate to the rate provided.)
	Calculated Rate:
	Numerator:
	Denominator:
	- OR -
	Indicating the data point if the measure is not a rate:
	Data Point:
16e.	Provide the Progress Report performance period (i.e., month and year when data collection began and ended) covered by the progress report assessment:
16f.	Restate the numerical value performance target for this measure (i.e., the target rate or data point the QIS intends to achieve) from the Implementation Plan or the Modification Summary Supplement on file, if applicable: (Note: This entry should be a rate (%) or a data point target, NOT a percentage change.)

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16g.	Was the performance target achieved?
	○ Yes ○ No
Meas	sure 1b:
16h.	Restate Measure 1b name from the Implementation Plan or the Modification Summary Supplement on file, if applicable:
	If this a consensus-based entity (CBE)-endorsed measure, please provide the 4-digit CBE-ID number:
16i.	Baseline Assessment: Restate the baseline results from the Implementation Plan or the Modification Summary Supplement on file, if applicable, by either :
	• Calculating the rate and providing the associated numerator and denominator: (<i>Note:</i> The numerator and denominator should calculate to the rate provided.)
	Calculated Rate:
	Numerator:
	Denominator:
	- OR -
	Indicating the data point, if the measure is not a rate:
	Data Point:
16j.	Provide the baseline performance period (i.e., month and year when data collection began and ended) covered by the baseline assessment provided in of the Implementation Plan or the Modification Summary Supplement on file, if applicable:
16k.	Provide the Progress Report results by either:
	 Calculating the rate and providing the associated numerator and denominator: (Note: The numerator and denominator should calculate to the rate provided.)
	Calculated Rate:

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	Numerator:
	Denominator:
	- OR -
	Indicating the data point if the measure is not a rate:
	Data Point:
16l.	Provide the Progress Report performance period (i.e., month and year when data collection began and ended) covered by the progress report assessment:
16m.	Restate the numerical value performance target for this measure (i.e., the target rate or data point the QIS intends to achieve) from the Implementation Plan or the Modification Summary Supplement on file, if applicable: (Note: This entry should be a rate (%) or a data point target, NOT a percentage change.)
16n.	Was the performance target achieved?
	○ Yes ○ No
QIS C	Goal 2
	ate Goal 2 identified in the Implementation Plan or the Modification Summary Supplement on file, licable.
QIS C	Goal 2:
(500 d	character limit)
Meas	sure 2a:
160.	Restate Measure 2a name from the Implementation Plan or the Modification Summary Supplement on file, if applicable:

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	If this a consensus-based entity (CBE)-endorsed measure, please provide the 4-digit CBE-ID number:
16p.	Baseline Assessment: Restate the baseline results from the Implementation Plan or the Modification Summary Supplement on file, if applicable, by either :
	 Calculating the rate and providing the associated numerator and denominator: (Note: The numerator and denominator should calculate to the rate provided.)
	Calculated Rate:
	Numerator:
	Denominator:
	- OR -
	Indicating the data point if the measure is not a rate:
	Data Point:
16q.	Provide the baseline performance period (i.e., month and year when data collection began and ended) covered by the baseline assessment provided in the Implementation Plan or the Modification Summary Supplement on file, if applicable:
16r.	Provide the Progress Report results by either:
	 Calculating the rate and providing the associated numerator and denominator: (Note: The numerator and denominator should calculate to the rate provided.)
	Calculated Rate:
	Numerator:
	Denominator:
	- OR -
	Indicating the data point if the measure is not a rate:
	Data Point:
16s.	Provide the Progress Report performance period (i.e., month and year when data collection began and ended) covered by the progress report assessment:
	-

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16t. Restate the numerical value performance target for this measure (i.e., the target rate or data point the QIS intends to achieve) from the Implementation Plan or the Modification Summary Supplement on file, if applicable: (Note: This entry should be a rate (%) or a data point target, NOT a percentage change.) 16u. Was the performance target achieved? No () Yes Measure 2b: 16v. Restate Measure 2b name from the Implementation Plan or the Modification Summary Supplement on file, if applicable: If this a consensus-based entity (CBE)-endorsed measure, please provide the 4-digit CBE-ID number: 16w. Baseline Assessment: Restate the baseline results from the Implementation Plan or the Modification Summary Supplement on file, if applicable, by either: Calculating the rate and providing the associated numerator and denominator: (**Note:** The numerator and denominator should calculate to the rate provided.) Calculated Rate: Numerator: Denominator: - OR -Indicating the data point if the measure is not a rate: Data Point: 16x. Provide the baseline performance period (i.e., month and year when data collection began and ended) covered by the baseline assessment provided in the Implementation Plan or the Modification Summary Supplement on file, if applicable: 16y. Provide the Progress Report results by either: Calculating the rate and providing the associated numerator and denominator: (**Note:** The numerator and denominator should calculate to the rate provided.)

	Calculated Rate:
	Numerator:
	Denominator:
	- OR -
	Indicating the data point if the measure is not a rate:
	Data Point:
16z.	Provide the Progress Report performance period (i.e., month and year when data collection began and ended) covered by the progress report assessment:
	-
16aa.	Restate the numerical value performance target for this measure (i.e., the target rate or data point the QIS intends to achieve) from the Implementation Plan or the Modification Summary Supplement on file, if applicable: (Note: This entry should be a rate (%) or a data point target, NOT a percentage change.)
16bb.	. Was the performance target achieved? Yes No

17. Summary of Progress (Must Pass)

17a. Please provide a summary of progress covering the following details: (**Note:** Regardless of if you made progress toward the performance target(s), you will be required to describe any barriers encountered in Criterion 18a and any problems meeting timelines in Criterion 18b.)

- Indicate why progress was or was not made toward the performance target(s)
 documented in your QIS Implementation Plan or the Modification Summary Supplement
 on file, if applicable, and
- Include a description of activities that led to the outcome.

17b. If the issuer selected "Progress Report Closeout Form" in Element 1 of <i>thi</i> s Prog	
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form, provide the rationale for discontinuing the QIS.	ress Report
(1,000 character limit)	
(1,000 character limity	

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17c. If the issuer received an "Interim Meets" determination during the previous OIS Evaluation

Period Correction Report and describe the changes.

Period and was instructed to address the deficiencies in its subsequent Plan Year submission, please indicate which elements and/or criteria were updated based on the QIS Evaluation

1,000 charact	er limit)			

18. Barriers and Mitigation Activities

a .	Were barriers encountered in implementing the QIS over time? (Note: If your description of activities in Criterion 17a includes barriers to implementing the QIS, you are still required to complete Criterion 18a and elaborate on those barriers and any other barriers in implementing the QIS, if applicable, by providing the below information.)
	○ Yes ○ No
	If "Yes," describe:
	The barriers, and
	 The mitigation activities implemented to address each barrier.
	(1,500-character limit)

ISD.	(Note: If your description of activities in Criterion 17a includes problems meeting timelines, you are still required to complete Criterion 18b and elaborate on those problems and any other problems in meeting timelines, if applicable, by providing the below information.)
	If "Yes," describe:
	 The problems in meeting timelines and The mitigation activities implemented to address each problem in meeting the timeline.
	(1,500-character limit)
Repo	onal: If there is any additional information you would like to provide regarding your QIS Progress ort, please do so in the box below.

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