## **Quality Assessment and Improvement (QA&I) Cycle 3 Review Process**

## **CONFERENCE PREPARATION**

Prior to the QA&I Cycle 3 Provider Conference, AEs should request and review the following HCSIS reports:

* Provider Financial Metrics Report (current and prior FY)
* Provider Service Detail Report (current and prior FY)

The Provider Financial Metrics and Provider Service Detail Reports are overnight reports. The requested report will become available to download from the Reports Inbox on the next business day.

The content and suggested use of each of these reports is addressed below.

**Provider Financial Metrics**

To track progress and financial status, this report will assist users with the ability to view key financial metrics for a given provider. The report displays information by AE and SCO and has four parts:

1. ISP Information by Waiver and Base – The number of plans in non-approved status compared to the total number of plans (waiver and base)
2. Services Information by Waiver and Base – The number of services within approved plans that are in pending status (with or without previous authorization) compared to the number in authorized status (waiver and base)
3. Individual Information – The number of individuals the provider is authorized to serve compared to the number of individuals for which claims have been billed through PROMISe™ successfully
4. Utilization Information by AE and Waiver/Program – The number of authorized services compared to the services billed, as well as authorized dollars compared to dollars recovered through claims processing. The Provider Financial Metrics Report is available on the Reports Request screen under the Financials heading.

HCSIS roles that can access the Provider Financial Metrics Report include:

* County Fiscal Supervision
* County SC Oversight
* County Financial Worker
* County Financial Manager
* Extract Coordinator

**Things to consider by comparing the 2 years:**

1. Is the Provider is serving fewer people, about the same number of people or more people?
2. If there is a change, where is it occurring:
   1. SCO
   2. AE
3. Are there ISP authorization, billing and/or utilization issues noted?

**Provider Service Detail Report**

This report provides ODP and providers with service details for a specified fiscal year.

HCSIS roles that can access the Provider Service Details Report include:

• County Financial Manager

• County Financial Worker

• County Fiscal Supervision

• County Mass Rate Change

• County Provider Administrator

• County SC Oversight

• ISP Approval

• ISP Financial Support

Things to consider by comparing the 2 years:

1. Are there changes in the services provided?

2. If so, how do the “new” services align with ODP priorities and ISAC recommendations?