



Medicare Health Support **Phase I Definitions**

(NOTE: *Defined terms appear in italics throughout the document*)

Award and Timing

The *independent evaluation* informs the Secretary's decision to expand to Phase II or not. An award of a *program* which meets the *conditions for expansion* may occur no later than six months after a *program* ends. CMS may solicit for different *programs* based on the *independent evaluation results*. The timing of the Phase II solicitation(s) and award(s) depends on if/when the *independent evaluation results* show evidence of a *program* or *program component(s)* meeting the *conditions for expansion*. Each Phase II award will follow a competitive process.

Chronic Care Improvement Organizations (now known as Medicare Health Support Organizations (MHSO))

An entity that has entered into an agreement in Phase I to provide, directly or through contracts with subcontractors, a *chronic care improvement program*. Such an entity may be a disease management organization, health insurer, integrated delivery system, physician group practice, a consortium of such entities, or any other legal entity that the Secretary determines appropriate to carry out a *chronic care improvement program*. (1807(a)(2)(B))

Chronic Care Improvement Program

A *program* that is offered under the agreement where each *program* shall be designed to improve clinical quality and beneficiary satisfaction and achieve spending targets with respect to expenditures for targeted beneficiaries with one or more *threshold conditions*. (1807(a)(A))

Conditions for Expansion (Expansion of Phase I to Phase II)

The conditions that must be met by a *program* or *program component(s)* of such *program* are:

- a) improvement in clinical quality of care;
- b) improvement in beneficiary satisfaction ; **and**
- c) achievement of targets for savings to the program.

(1807(c)(2))

The targets for savings have to be met first followed by determinations of clinical and satisfaction target achievement.

Independent Evaluation

CMS requires an independent evaluation to determine if a *program* or *program component(s)* meets the *conditions for expansion*. Phase II shall only be



implemented if the *results* of the independent evaluation inform the Secretary that the *conditions for expansion* have been met by a *program* or *program component(s)*. In addition to the *reports to Congress (RTC)*, the independent evaluation is a separate and distinct requirement. (1807(b)(5))

Program

A program is a model offered under the agreement that provides the scope of functions and activities necessary to meet the criteria to carry out a *chronic care improvement program* for the entire assigned Phase I intervention group. (1807(a)(2)(A) and 1807(e)(1))

Program Component

A program component is the function and/or activity provided to improve clinical quality, satisfaction and reduce cost as applied to the entire assigned Phase I intervention group with one *threshold condition* as compared to the control group. (1807(c)(2))

Reports to Congress (RTC)

The Secretary's reports to Congress provide interim updates on the pilot *program(s)*. The RTCs are not to be considered the same as the *independent evaluation*, and are not necessarily coupled with the *independent evaluation*. The RTCs are an independent obligation. (1807(g)(2)(b))

Results

The results from the independent evaluation determine whether or not the *program* or *program component(s)* met the specific *conditions for expansion*. If the Secretary finds that the results of the *independent evaluation* indicate that the *conditions for expansion* have been met by a *program* or *program component(s)* the Secretary shall enter into agreements to expand the implementation of the *program* or *program component(s)*. The Secretary must have *independent evaluation* results to determine if expansion to Phase II meets statutory requirements. (1807(b)(5) and 1807(c)(1))

Threshold Condition

A threshold condition is a chronic condition, such as congestive heart failure, diabetes, chronic obstructive pulmonary disease (COPD), or other diseases or conditions, as selected by the Secretary as appropriate for the establishment of a *chronic care improvement program*. The threshold conditions tested in Phase I are congestive heart failure and diabetes. (1807(a)(2)(D))