



## **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))