





Policy Title:	Health Outcome Survey (HOS®)							
Department:	Clinical Quality Improvement							
Policy Number:	CQI-6							
Issue Day:	Effective Date: 02/01/2016							
Next Review Date: 12/2/21	Revision Dates: 12/4/13, 4/22/15, 01/27/16, 11/15/19, 11/15/20							
		<table border="1"> <tr> <td>Approved By:</td> <td></td> </tr> <tr> <td></td> <td>12/2/20</td> </tr> <tr> <td>Julianne Eckert, RN, BSN - Director, Clinical Quality Improvement</td> <td>Date</td> </tr> </table>	Approved By:			12/2/20	Julianne Eckert, RN, BSN - Director, Clinical Quality Improvement	Date
Approved By:								
	12/2/20							
Julianne Eckert, RN, BSN - Director, Clinical Quality Improvement	Date							
REFERENCE:	Medicare Managed Care Manual: Ch. 5, Section 30.2 - Medicare HOS Requirements;							

<p>Purpose: To establish requirements and processes to conduct HOS® survey, report and manage results</p>
<p>Scope: Applies to the entire Medicare Advantage population and Clover Health quality staff</p>
<p>Policy: Health Outcome Survey (HOS®) Reporting Requirements</p>
<p>Definitions:</p>
<p>Procedure:</p> <ol style="list-style-type: none"> 1. Clover Health must report the Health Outcomes Survey (HOS®) if: <ol style="list-style-type: none"> a. It has a minimum of 500 members enrolled as of February of the reporting year per H Contract b. Baseline surveys of 1200 members per contract will be conducted every year for new cohorts c. Re-surveys will be conducted 2 years after each baseline

2. The Director, Clinical Quality Improvement is responsible for contracting with an NCQA certified HOS survey vendor.
3. The Director, Clinical Quality Improvement is expected to have a contract in place in January of the reporting year.
4. The Clinical Quality Improvement team will ensure that updated contact information (beneficiaries' telephone numbers) will be provided to the contracted vendor in time for survey initiation in April of the measurement year.
5. The results of the survey (Baseline Profile Report and Performance Measurement Report), as reported by the survey contracted vendor, are to be reported to the Quality Improvement Committee and the Board of Directors as part of the Annual Quality Improvement Program Evaluation Report.
6. Clover Health will analyze and validate the data results, identify opportunities for improvement, conduct barrier analysis and implement interventions where results do not meet initial plan's goals.
 - a. A summary of these findings will be submitted and discussed to the Quality Improvement Committee for review and identification of quality improvement opportunities.

Related Policies:

Attachments:

New, Revised or Reviewed/ No Changes	Previous Policy Name, If Applicable/Description of Changes	Department Lead Approval (Name)	Date Department Lead Approved	Date Policy Committee Approved
Revised	Revisions include those to reflect current HOS submission process and requirements.	Julianne Eckert	11/11/19	11/15/19
Review	Annual Review / Revisions include those to reflect current HOS submission process and requirements.	Julianne Eckert	11/15/20	12/2/20