



## MEMORANDUM

TO: Medicare Advantage Organizations  
FROM: HOS Project Team  
DATE: March 14, 2022  
RE: Medicare Health Outcomes Survey (HOS) 2022 Administration

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The Centers for Medicare & Medicaid Services (CMS) has determined that your contract is required to report the HEDIS<sup>®1</sup> HOS in 2022. CMS has contracted with the National Committee for Quality Assurance (NCQA) to oversee the administration of the HOS.

This memo contains information about CMS HOS 2022 reporting requirements and actions participating Medicare Advantage Organizations (MAOs) need to take. CMS will also post this memo on the [HOS website](http://hosonline.org/) (<http://hosonline.org/>). This memo includes the following sections and attachments:

- HOS 2022 Survey Administration Memo Changes.
- **NEW Process** for Notifying the HOS Project Team of Survey Vendor Selection.
- Reporting Requirements.
- Institutional Special Needs Plan (I-SNP) Reporting Requirements.
- Contracting with a Survey Vendor.
- Cohort 25 Baseline and Cohort 23 Follow-Up Survey Administration.
- Optional FIDE SNP Reporting.
- Oversampling.
- HOS Data Dissemination.
- Communication with Medicare Advantage (MA) Members about the HOS.
- Attachment 1—MAOs Required to Report HOS in 2022.
- Attachment 2—Fully Integrated Dual-Eligible (FIDE) Special Needs Plans (SNP) Voluntarily Reporting in 2022.
- Attachment 3—Conditionally-Approved Medicare HOS and HOS-M Survey Vendors.
- Attachment 4—Sample Text for Use in a Member Newsletter Encouraging Members to Complete the HOS.

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<sup>1</sup> HEDIS<sup>®</sup> is a registered trademark of the National Committee for Quality Assurance (NCQA).

## HOS 2022 Survey Administration Changes

MAOs are strongly encouraged to review the entire HOS 2022 Survey Administration memo. Refer to the following sections in this memo to review key updates and changes to HOS 2022 Survey administration:

- [NEW Process for Notifying the HOS Project Team of Survey Vendor Selection](#)
- [Optional FIDE SNP Reporting.](#)

### NEW Process for Notifying the HOS Project Team of Survey Vendor Selection

All MAOs must contract with a CMS-approved HOS survey vendor to field their surveys. A list of CMS-approved HOS survey vendors is posted on the [HOS website](#) (<https://www.hosonline.org/en/program-overview/survey-vendors/>).

MA contracts must report their survey vendor selection via the [HOS survey vendor selection web form](#) (<https://www.ncqa.org/hedis/measures/hos/survey-vendor-selection-form/>) **by Friday, April 29, 2022**. The web form must be completed in its entirety and include the following information:

- HOS primary contact person at MA contract (include telephone and email).
- CMS contract number and contract name.
- Cohort administration (e.g., Cohort 25 Baseline, Cohort 23 Follow-Up, or both).
- Oversampling request specifying the associated contract number and oversampling percentage.<sup>2</sup>
- Name of HOS survey vendor.<sup>3</sup>
- Confirmation of voluntary FIDE SNP participation (if applicable), including contract number(s), Plan Benefit Package (PBP) ID(s), frailty survey(s) and FIDE SNP contact person.<sup>4</sup>

The HOS provides a general indication of how well an MAO manages the physical and mental health functioning of its beneficiaries. The HOS measures a beneficiary's physical and mental health status at the beginning (Baseline) and the end (Follow-Up) of a two-year period. With consideration for risk adjustment factors, a two-year change score is calculated and a beneficiary's physical and mental health statuses are categorized as better, the same, or worse than expected.

### Reporting Requirements

The following MAOs and other organization types with Medicare contracts in effect on or before January 1, 2021, **are required** to report the Baseline HOS in 2022, provided that they have a minimum enrollment of 500 members as of February 1, 2022:

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<sup>2</sup> See Oversampling section of the memo for additional details on oversampling.

<sup>3</sup> See Attachment 3 for the list of conditionally-approved HOS and HOS-M survey vendors.

<sup>4</sup> See Optional FIDE SNP Reporting section of the memo for additional details and Attachment 2 for a list of FIDE SNPs voluntarily reporting in 2021.

- All MAOs, including all coordinated care plans, Private Fee-for-Service (PFFS) contracts, and Medical Savings Account (MSA) contracts.
- Section 1876 Cost contracts, even if they are closed for enrollment.
- Employer/union only contracts.
- Medicare Medicaid Plans (MMPs).

In addition, all organizations that reported a Cohort 23 Baseline survey in 2020 are required to administer a Cohort 23 Follow-Up survey in 2022.

In the event of a consolidation, merger, or novation, the surviving contract must report Follow-Up HOS for all members of all contracts involved. All eligible members of consolidated, merged, or novated contracts will be resurveyed and the results will be reported as one under the surviving contract. In the event of a contract conversion, the contract must report if its new organization type is required to report. Contracts that elect to voluntarily field the HOS Baseline in 2022 are required to administer the Follow-Up survey in 2024. All contracts electing to field the HOS survey are required to publicly report results.

### **Institutional Special Needs Plan (I-SNP) Reporting Requirements**

Contracts in effect on or before January 1, 2021, and with a minimum of 500 **non-I-SNP** beneficiaries as of February 1, 2022, **are** required to administer the HOS Baseline survey in 2022 to their non-I-SNP beneficiaries. CMS will exclude beneficiaries enrolled in I-SNPs at the PBP level from the HOS Baseline survey.

All contracts that administered the Cohort 23 Baseline in 2020 **are** required to administer Cohort 23 Follow-Up in 2022.

### **Contracting with a Survey Vendor**

CMS annually trains and approves survey vendors to administer the HOS survey on behalf of MA contracts. A list of CMS-approved HOS survey vendors is posted on the [HOS website](https://www.hosonline.org/en/program-overview/survey-vendors/) (<https://www.hosonline.org/en/program-overview/survey-vendors/>).

The following survey vendors are conditionally-approved by CMS to administer the HOS in 2022:

1. Center for the Study of Services (CSS)
2. DataStat, Inc.
3. Market Decisions Research
4. SPH Analytics

MAOs are required to contract with a CMS-approved survey vendor. CMS encourages MAOs to work with their survey vendor to understand the survey administration and data submission timelines. To ensure the confidentiality of the survey process, survey vendors are prohibited from providing MAOs with patient-level data or reports during any phase of the data collection period or between Baseline and Follow-Up data collection for any cohort. Survey vendors will provide MAOs with regular progress reports containing contract-level summary indicators (e.g., interim mail and telephone response rates).

## **Cohort 25 Baseline and Cohort 23 Follow-Up Survey Administration**

The Cohort 25 Baseline and Cohort 23 Follow-Up surveys are scheduled for administration from late July through November 2022. The mail and telephone surveys will be administered in English and Spanish. The mail survey is also available in Chinese and Russian and telephone surveys are also available in Chinese. Fielding the mail or telephone survey in Chinese and/or the mail survey in Russian is optional. MAOs must work with their survey vendor to determine which optional languages to field.

CMS provides the HOS in English, Spanish, Chinese, and Russian to facilitate the participation of the broadest pool of plan members and to promote accurate measurement of the experience of all Medicare beneficiaries. Collecting information from beneficiaries who can only respond to the survey in Spanish, Chinese, or Russian increases the usefulness of the HOS for quality improvement initiatives.

MAOs should notify survey vendors of any additional language translations needed for the HOS. CMS will consider these translation requests for implementation in future survey years.

An updated version of the HOS manual, *HEDIS Measurement Year 2021, Volume 6: Specifications for the Medicare Health Outcomes Survey*, will be published in May 2022. This volume can be obtained by calling NCQA's Customer Support line at 888-275-7585 or ordered online by visiting [www.ncqa.org](http://www.ncqa.org).

## **Optional FIDE SNP Reporting**

MAOs that expect to sponsor a FIDE SNP in 2022 may elect to report HOS at the PBP level to determine eligibility for a frailty adjustment payment under the Affordable Care Act. Voluntary reporting at the PBP level is in addition to the standard HOS requirements for quality reporting at the contract level. MAOs sponsoring a FIDE SNP may elect to report HOS or HOS-M at the PBP level even if the MA contract is not required to report HOS quality reporting due to low enrollment.

FIDE SNPs electing to report were required to notify CMS of this decision by February 25, 2022. MAOs that elect to use the HOS for measuring frailty may contract with the CMS-approved survey vendor of their choice. MAOs that elect to use the HOS-M for measuring frailty may contract with CSS or DataStat.

MAOs electing to report HOS or HOS-M at the PBP level must report their survey vendor selection to NCQA via the [HOS survey vendor selection web form](https://www.ncqa.org/hedis/measures/hos/survey-vendor-selection-form/) (<https://www.ncqa.org/hedis/measures/hos/survey-vendor-selection-form/>) no later than **Friday, April 29, 2022**.

Surveys are fielded at the PBP level for frailty measurement. PBPs must have a minimum of 50 members to participate. For PBPs with enrollment in excess of 1,200 members, sample sizes are approximately 1,200. For PBPs with enrollment between 50 and 1,200, all members are surveyed.

CMS released the *Advance Notice of Methodological Changes for Calendar Year (CY) 2023* on February 2, 2022. This memorandum provides more information about frailty adjustment, including the methodology used to determine if FIDE SNPs have the same level of frailty as Programs of All-Inclusive Care for the Elderly (PACE) and thus qualify for frailty payments in 2023.

## Oversampling

All MAOs required to report HOS will have the option of surveying a Baseline sample of members that is larger than the standard sample size of 1,200. Oversampling can only occur at the contract level. Oversampling requests should be expressed as a whole percentage of the standard sample size. Any oversampling request submitted as a decimal will be rounded to the nearest whole number.

MAOs interested in oversampling must make a formal request to NCQA, along with their survey vendor selection, no later than **Friday, April 29, 2022**. MAOs must specify the contract number associated with the oversampling request and the requested oversampling percentage. All oversampling requests are subject to approval by CMS.

## HOS Data Dissemination

Although beneficiary-level HOS data will not be provided to MAOs after Baseline data collection, MAOs will receive the following from CMS.

1. ***HOS Baseline Report.*** This report is made available each fall to MAOs that participated in the previous year's Baseline administration of the HOS. This quality improvement (QI) tool, which presents an aggregate overview of the Baseline health status of MA enrollees, was developed and extensively tested to ensure that data are useful and actionable.
2. ***HEDIS HOS Effectiveness of Care Report.*** This report is made available to MAOs that participated in the previous year's Baseline and/or Follow-Up administration of the HOS each spring. The HEDIS HOS Effectiveness of Care Report is released in the spring to provide MAOs an opportunity to review HEDIS HOS Effectiveness of Care results during the Star Ratings preview periods. The HEDIS HOS Effectiveness of Care Report includes MAO, state, regional, and national HOS Effectiveness of Care results for the following HEDIS HOS measures: Management of Urinary Incontinence in Older Adults (MUI), Physical Activity in Older Adults (PAO), and Fall Risk Management (FRM).
3. ***HOS Performance Measurement Report and Data.*** A Performance Measurement report is produced after administration of the Follow-Up HOS. Survey responses from both the Baseline and two-year Follow-Up for each cohort are merged to create a performance measurement data set. The resulting aggregation of the change scores yields contract-level HOS performance measurement results that describe change in health status over time for beneficiaries in each contract. Performance Measurement reports and corresponding data are designed to support QI activities. Beneficiary-level performance measurement data are made available to MA contracts upon request after distribution of the Performance Measurement reports.

**All report distribution occurs electronically through the CMS Health Plan Management System (HPMS).** HOS Star Ratings Validation and Aggregate Score Analysis tables are also available in the HOS module on HPMS. Notification of the availability of reports and performance measurement data occurs electronically through HPMS. For access to HPMS, contact your CMS Quality Point of Contact.

### **Communication with MA Members about the HOS**

MAOs are allowed to notify members that they may be asked to participate in the HOS. In an effort to prevent bias in survey results, certain types of communication are not permitted. MAOs may not:

- Attempt to influence or encourage members to answer survey questions in a particular way.
- Imply that positive feedback from members will reward or benefit the MAO or its personnel or indicate the MAO is hoping for a specific response.
- Offer incentives of any kind for participating in the survey.
- Show or provide the HOS questionnaire or cover letters to members prior to survey administration.
- Ask HOS questions of members eight (8) weeks prior to and during HOS administration.

### **Attachments**

1. Attachment 1 is a list of Medicare Advantage contracts required to report HOS in 2022. If you believe that there are errors in this list, please contact the HOS Project Team at [hos@ncqa.org](mailto:hos@ncqa.org).
2. Attachment 2 is a list of Medicare contracts that have elected to participate in 2022 at the FIDE SNP level.
3. Attachment 3 contains contact information for CMS conditionally-approved HOS and HOS-M survey vendors.
4. Attachment 4 contains sample language that may be used by MAOs in a member newsletter or other communication that encourages members to complete the HOS.

We look forward to working with your organization on this important endeavor.

## ATTACHMENT 1

### Medicare Advantage Organizations Required to Administer HOS in 2022

| Contract ID | Contract Name                                     | Contract ID | Contract Name                          |
|-------------|---|-------------|--|
| H0022       | BUCKEYE COMMUNITY HEALTH PLAN, INC.               | H0332       | KS PLAN ADMINISTRATORS, LLC            |
| H0028       | CHA HMO, INC.                                     | H0336       | HUMANA HEALTH PLAN, INC.               |
| H0034       | HAMASPIK, INC.                                    | H0351       | HEALTH NET OF ARIZONA, INC.            |
| H0062       | SUPERIOR HEALTHPLAN COMMUNITY SOLUTIONS, INC.     | H0354       | CIGNA HEALTHCARE OF ARIZONA, INC.      |
| H0074       | WELLCARE OF MISSISSIPPI, INC.                     | H0422       | UCARE HEALTH, INC.                     |
| H0088       | WELLCARE HEALTH INSURANCE OF NEW YORK, INC.       | H0423       | METROPLUS HEALTH PLAN, INC.            |
| H0104       | BLUE CROSS AND BLUE SHIELD OF ALABAMA             | H0432       | UNITEDHEALTHCARE OF ALABAMA, INC.      |
| H0107       | HEALTH CARE SERVICE CORPORATION                   | H0439       | CIGNA HEALTHCARE OF GEORGIA, INC.      |
| H0111       | WELLCARE OF GEORGIA, INC.                         | H0473       | HUMANA INSURANCE COMPANY OF KENTUCKY   |
| H0137       | COMMONWEALTH CARE ALLIANCE, INC.                  | H0480       | MERIDIAN HEALTH PLAN OF MICHIGAN, INC. |
| H0148       | BLUE SHIELD OF CALIFORNIA PROMISE HEALTH PLAN     | H0482       | CENTENE VENTURE COMPANY MICHIGAN       |
| H0154       | VIVA HEALTH, INC.                                 | H0504       | CALIFORNIA PHYSICIANS' SERVICE         |
| H0169       | UNITEDHEALTHCARE OF THE MIDWEST, INC.             | H0523       | AETNA HEALTH OF CALIFORNIA INC.        |
| H0174       | WELLCARE OF TEXAS, INC.                           | H0524       | KAISER FOUNDATION HP, INC.             |
| H0192       | AMERIHEALTH MICHIGAN, INC.                        | H0543       | UHC OF CALIFORNIA                      |
| H0251       | UNITEDHEALTHCARE PLAN OF THE RIVER VALLEY, INC.   | H0544       | BLUE CROSS OF CALIFORNIA               |
| H0270       | WELLCARE HEALTH INSURANCE COMPANY OF AMERICA      | H0545       | INTER VALLEY HEALTH PLAN, INC.         |
| H0271       | UNITEDHEALTHCARE INSURANCE COMPANY OF AMERICA     | H0562       | HEALTH NET OF CALIFORNIA, INC.         |
| H0292       | HUMANA HEALTH PLAN OF OHIO, INC.                  | H0571       | CHINESE COMMUNITY HEALTH PLAN          |
| H0294       | CARE IMPROVEMENT PLUS WISCONSIN INSURANCE COMPANY | H0609       | PACIFICARE OF COLORADO, INC.           |
| H0302       | MEDISUN, INC.                                     | H0624       | UNITEDHEALTHCARE INSURANCE COMPANY     |
| H0321       | ARIZONA PHYSICIANS IPA, INC.                      | H0628       | AETNA HEALTH OF OHIO INC.              |

<sup>1</sup> MAO is not required to administer the 2022 HOS Cohort 25 Baseline survey due to enrollment less than 500 as of February 1, 2022. MAO administered the Cohort 23 Baseline survey in 2020 and **is required** to administer the Cohort 23 Follow-Up survey in 2022.



| Contract ID | Contract Name                                      | Contract ID        | Contract Name                                      |
|-------------|--|--------------------|--|
| H0630       | KAISER FOUNDATION HP OF CO                         | H1170              | KAISER FOUNDATION HP OF GA, INC.                   |
| H0672       | CIGNA HEALTHCARE OF COLORADO, INC.                 | H1181              | NETWORK HEALTH INSURANCE CORPORATION               |
| H0712       | WELLCARE OF CONNECTICUT, INC.                      | H1189              | CHRISTUS HEALTH PLAN                               |
| H0724       | BUCKEYE HEALTH PLAN COMMUNITY SOLUTIONS, Inc.      | H1225              | HOPKINS HEALTH ADVANTAGE, INC.                     |
| H0755       | OXFORD HEALTH PLANS (CT), INC.                     | H1230              | KAISER FOUNDATION HP, INC.                         |
| H0838       | UNIVERSAL CARE, INC.                               | H1248              | LOUISIANA HEALTH SERVICE & INDEMNITY COMPANY       |
| H0885       | HEALTHIER NEW JERSEY INSURANCE COMPANY             | H1278              | HARKEN HEALTH INSURANCE COMPANY                    |
| H0907       | AMERIGROUP IOWA, INC.                              | H1290              | DEVOTED HEALTH PLAN OF FLORIDA, INC.               |
| H0908       | BUCKEYE COMMUNITY HEALTH PLAN, INC.                | H1302              | BLUE CROSS OF IDAHO CARE PLUS, INC.                |
| H0913       | WELLCARE HEALTH PLANS OF NEW JERSEY, INC.          | H1304              | REGENCE BLUESHIELD OF IDAHO                        |
| H0927       | HEALTH CARE SERVICE CORPORATION                    | H1350              | BLUE CROSS OF IDAHO CARE PLUS, INC.                |
| H0969       | WELLCARE HEALTH INSURANCE COMPANY OF NEW HAMPSHIRE | H1352              | BLUE-ADVANTAGE PLUS OF KANSAS CITY, INC.           |
| H0982       | SOLIS HEALTH PLANS, INC.                           | H1353              | WELLCARE OF WASHINGTON, INC.                       |
| H1016       | AVMED, INC.  | H1360              | HEALTH PLAN OF NEVADA, INC.                        |
| H1019       | CAREPLUS HEALTH PLANS, INC.                        | H1365              | MARTIN'S POINT GENERATIONS ADVANTAGE, INC.         |
| H1032       | SUNSHINE STATE HEALTH PLAN, INC.                   | H1375              | UNITEDHEALTHCARE COMMUNITY PLAN OF CALIFORNIA, INC |
| H1035       | FLORIDA BLUE MEDICARE, INC.                        | H1415              | HEALTHSPRING LIFE & HEALTH INSURANCE COMPANY, INC. |
| H1036       | HUMANA MEDICAL PLAN, INC.                          | H1416              | HARMONY HEALTH PLAN, INC.                          |
| H1045       | PREFERRED CARE PARTNERS, INC.                      | H1423              | AMERIGROUP OHIO, INC.                              |
| H1099       | HEALTH FIRST HEALTH PLANS                          | H1426 <sup>1</sup> | VITALITY HEALTH PLAN OF CALIFORNIA, INC.           |
| H1109       | AETNA HEALTH INC.(GA)                              | H1436              | ABSOLUTE TOTAL CARE, INC.                          |
| H1111       | UNITEDHEALTHCARE OF GEORGIA, INC.                  | H1463              | HEALTH ALLIANCE CONNECT, INC.                      |
| H1112       | WELLCARE OF GEORGIA, INC.                          | H1468              | HUMANA BENEFIT PLAN OF ILLINOIS, INC.              |

<sup>1</sup> MAO is not required to administer the 2022 HOS Cohort 25 Baseline survey due to enrollment less than 500 as of February 1, 2022. MAO administered the Cohort 23 Baseline survey in 2020 and **is required** to administer the Cohort 23 Follow-Up survey in 2022.



| Contract ID | Contract Name                                      | Contract ID | Contract Name                                    |
|-------------|--|-------------|--|
| H1537       | CARE IMPROVEMENT PLUS SOUTH CENTRAL INSURANCE CO.  | H1924       | PORT HOLDINGS, INC.                              |
| H1587       | ARKANSAS SUPERIOR SELECT, INC.                     | H1944       | UNITEDHEALTHCARE OF NEW ENGLAND, INC.            |
| H1607       | ANTHEM INSURANCE COMPANIES, INC.                   | H1947       | COMMUNITY CARE HEALTH PLAN OF LOUISIANA, INC.    |
| H1608       | COVENTRY HEALTH AND LIFE INSURANCE COMPANY         | H1951       | HUMANA HEALTH BENEFIT PLAN OF LOUISIANA, INC.    |
| H1609       | AETNA HEALTH INC. (FL)                             | H1961       | PEOPLES HEALTH, INC.                             |
| H1610       | COVENTRY HEALTH CARE OF VIRGINIA, INC.             | H1969       | REGENCE BLUESHIELD OF IDAHO                      |
| H1651       | MEDICAL ASSOCIATES HEALTH PLAN, INC.               | H1977       | UPPER PENINSULA HEALTH PLAN, LLC                 |
| H1659       | UNITEDHEALTHCARE INSURANCE CO. OF THE RIVER VALLEY | H1993       | ASTIVA HEALTH, INC.                              |
| H1664       | HOME STATE HEALTH PLAN, INC.                       | H1994       | SELECTHEALTH, INC.                               |
| H1666       | HCSC INSURANCE SERVICES COMPANY                    | H1997       | REGENCE BLUESHIELD                               |
| H1692       | COVENTRY HEALTH CARE OF WEST VIRGINIA, INC.        | H2001       | SIERRA HEALTH AND LIFE INSURANCE COMPANY, INC.   |
| H1722       | HEALTHFIRST HEALTH PLAN, INC.                      | H2029       | HUMANA INSURANCE OF PUERTO RICO, INC.            |
| H1723       | ABSOLUTE TOTAL CARE, INC.                          | H2032       | BAYLOR SCOTT & WHITE INSURANCE COMPANY           |
| H1732       | HEALTHPLUS HP, LLC                                 | H2034       | COMMUNITY CARE HEALTH PLAN, INC.                 |
| H1737       | HEALTH ALLIANCE - MIDWEST, INC.                    | H2056       | AETNA BETTER HEALTH OF MICHIGAN INC.             |
| H1774       | CENTENE VENTURE COMPANY INDIANA, INC.              | H2108       | BRAVO HEALTH MID-ATLANTIC, INC.                  |
| H1821       | UNITEDHEALTHCARE OF OREGON, INC.                   | H2134       | WESTERN SKY COMMUNITY CARE, INC.                 |
| H1846       | MOUNT CARMEL HEALTH INSURANCE COMPANY              | H2161       | UPPER PENINSULA HEALTH PLAN, LLC                 |
| H1848       | WELLCARE OF ALABAMA, INC.                          | H2162       | WELLCARE OF NEW HAMPSHIRE, INC.                  |
| H1862       | WELLCARE HEALTH PLANS OF VERMONT, INC.             | H2168       | VILLAGE SENIOR SERVICES CORPORATION              |
| H1889       | UNITEDHEALTHCARE OF FLORIDA, INC.                  | H2171       | CARE N' CARE INSURANCE COMPANY, INC.             |
| H1894       | AMERIGROUP WASHINGTON, INC.                        | H2172       | KAISER FDTN HLTH PLAN OF THE MID-ATLANTIC STATES |
| H1914       | WELLCARE HEALTH INSURANCE OF CONNECTICUT, INC.     | H2174       | TRILLIUM COMMUNITY HEALTH PLAN, INC.             |

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| Contract ID | Contract Name                                    | Contract ID | Contract Name                                      |
|-------------|--|-------------|--|
| H2196       | UNITEDHEALTHCARE OF MISSISSIPPI, INC.            | H2458       | MEDICA HEALTH PLANS                                |
| H2224       | SENIOR WHOLE HEALTH, LLC                         | H2459       | UCARE MINNESOTA                                    |
| H2225       | COMMONWEALTH CARE ALLIANCE, INC.                 | H2461       | BLUE CROSS AND BLUE SHIELD OF MINNESOTA            |
| H2226       | UNITEDHEALTHCARE INSURANCE COMPANY               | H2462       | GROUP HEALTH PLAN, INC. (MN)                       |
| H2228       | UNITEDHEALTHCARE INSURANCE COMPANY               | H2463       | HUMANA HEALTH PLAN OF TEXAS, INC.                  |
| H2230       | BCBS OF MASSACHUSETTS HMO BLUE, INC.             | H2486       | HUMANA MEDICAL PLAN OF UTAH, INC.                  |
| H2235       | BAYCARE SELECT HEALTH PLANS, INC.                | H2491       | WELLCARE HEALTH INSURANCE OF ARIZONA, INC.         |
| H2237       | INDEPENDENT CARE HEALTH PLAN, INC.               | H2506       | AETNA BETTER HEALTH PREMIER PLAN MMAI INC.         |
| H2241       | GOLDEN STATE MEDICARE HEALTH PLAN                | H2531       | UNITEDHEALTHCARE COMMUNITY PLAN OF OHIO, INC.      |
| H2247       | UNITEDHEALTHCARE COMMUNITY PLAN, INC.            | H2533       | MOLINA HEALTHCARE OF SOUTH CAROLINA, INC.          |
| H2256       | TUFTS ASSOCIATED HEALTH MAINTENANCE ORGANIZATION | H2563       | OPTIMA HEALTH PLAN                                 |
| H2261       | BCBS OF MASSACHUSETTS HMO BLUE, INC.             | H2577       | CARE IMPROVEMENT PLUS OF TEXAS INSURANCE COMPANY   |
| H2288       | BRIGHT HEALTH INSURANCE COMPANY OF NEW YORK      | H2582       | ROCKY MOUNTAIN HEALTH MAINTENANCE ORGANIZATION     |
| H2320       | PRIORITY HEALTH                                  | H2593       | AMERICIGROUP TEXAS, INC.                           |
| H2322       | ALLIANCE HEALTH AND LIFE INSURANCE COMPANY       | H2610       | ESSENCE HEALTHCARE, INC.                           |
| H2354       | HEALTH ALLIANCE PLAN OF MICHIGAN                 | H2624       | CARE N' CARE INSURANCE COMPANY OF NORTH CAROLINA   |
| H2406       | UNITEDHEALTHCARE INSURANCE COMPANY               | H2663       | COVENTRY HEALTH CARE OF MISSOURI, INC              |
| H2416       | PRIMEWEST RURAL MN HEALTH CARE ACCESS INITIATIVE | H2678       | MORECARE, INC.                                     |
| H2419       | SOUTH COUNTRY HEALTH ALLIANCE                    | H2697       | DEVOTED HEALTH PLAN OF OHIO, INC.                  |
| H2422       | HEALTHPARTNERS, INC.                             | H2722       | VANTAGE HEALTH PLAN OF ARKANSAS, INC.              |
| H2425       | BLUE PLUS  | H2765       | SUMMIT HEALTH PLAN, INC.                           |
| H2450       | MEDICA INSURANCE COMPANY                         | H2775       | AMERICAN PROGRESSIVE LIFE & HLTH INS COMPANY OF NY |
| H2456       | UCARE MINNESOTA                                  | H2782       | WESTERN HEALTH ADVANTAGE                           |

<sup>1</sup> MAO is not required to administer the 2022 HOS Cohort 25 Baseline survey due to enrollment less of less than 500 as of February 1, 2022. MAO administered the Cohort 23 Baseline survey in 2020 and **is required** to administer the Cohort 23 Follow-Up survey in 2022.

| Contract ID | Contract Name                                      | Contract ID | Contract Name                              |
|-------------|--|-------------|--|
| H2793       | IMPERIAL INSURANCE COMPANIES INC.                  | H3219       | ALLINA HEALTH AND AETNA INSURANCE COMPANY  |
| H2802       | UNITEDHEALTHCARE OF THE MIDLANDS, INC.             | H3237       | HEALTH NET COMMUNITY SOLUTIONS, INC.       |
| H2816       | AMERICAN PROGRESSIVE LIFE & HLTH INS COMPANY OF NY | H3239       | AETNA BETTER HEALTH, INC. (LA)             |
| H2825       | MARY WASHINGTON HEALTH PLAN                        | H3240       | AMERIGROUP NEW JERSEY, INC.                |
| H2836       | ANTHEM HEALTH PLANS, INC.                          | H3251       | HEALTH CARE SERVICE CORPORATION            |
| H2853       | CENTENE VENTURE COMPANY TENNESSEE                  | H3256       | UNITEDHEALTHCARE OF GEORGIA, INC.          |
| H2879       | MOLINA HEALTHCARE OF WISCONSIN, INC.               | H3259       | VOLUNTEER STATE HEALTH PLAN                |
| H2915       | PENNSYLVANIA HEALTH & WELLNESS, INC.               | H3276       | CONNECTICARE INSURANCE COMPANY, INC.       |
| H2944       | HUMANA INSURANCE COMPANY                           | H3281       | BRIGHT HEALTH INSURANCE COMPANY OF FLORIDA |
| H2960       | HOMETOWN HEALTH PLAN, INC.                         | H3288       | AETNA HEALTH AND LIFE INSURANCE COMPANY    |
| H2962       | ULTIMATE HEALTH PLANS, INC.                        | H3293       | MMM OF FLORIDA, INC.                       |
| H2986       | ESSENCE HEALTHCARE OF CALIFORNIA, INC.             | H3305       | MVP HEALTH PLAN, INC.                      |
| H3047       | WELLCARE HEALTH INSURANCE COMPANY OF LOUISIANA     | H3307       | OXFORD HEALTH PLANS (NY), INC.             |
| H3071       | COMMUNITY CARE ALLIANCE OF ILLINOIS, INC.          | H3312       | AETNA HEALTH INC. (NY)                     |
| H3113       | OXFORD HEALTH PLANS (NJ), INC.                     | H3330       | HEALTH INSURANCE PLAN OF GREATER NEW YORK  |
| H3132       | AHF MCO OF FLORIDA, INC.                           | H3335       | EXCELLUS HEALTH PLAN, INC.                 |
| H3146       | AETNA BETTER HEALTH INC. (GA)                      | H3342       | EMPIRE HEALTHCHOICE ASSURANCE, INC.        |
| H3152       | AETNA HEALTH INC. (NJ)                             | H3344       | INDEPENDENT HEALTH BENEFITS CORPORATION    |
| H3154       | HORIZON INSURANCE COMPANY                          | H3347       | ELDERPLAN, INC.                            |
| H3170       | SAPPHIRE EDGE, INC.                                | H3351       | EXCELLUS HEALTH PLAN, INC.                 |
| H3192       | AETNA HEALTH OF MICHIGAN INC.                      | H3359       | HEALTHFIRST HEALTH PLAN, INC.              |
| H3204       | PRESBYTERIAN HEALTH PLAN                           | H3362       | INDEPENDENT HEALTH ASSOCIATION, INC.       |
| H3206       | PRESBYTERIAN INSURANCE COMPANY, INC.               | H3379       | UNITEDHEALTHCARE OF NEW YORK, INC.         |

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| Contract ID | Contract Name                                   | Contract ID | Contract Name                                     |
|-------------|---|-------------|---|
| H3384       | HIGHMARK WESTERN AND NORTHEASTERN NEW YORK INC. | H3668       | MOUNT CARMEL HEALTH PLAN, INC.                    |
| H3387       | UNITEDHEALTHCARE OF NEW YORK, INC.              | H3672       | THE HEALTH PLAN OF WEST VIRGINIA, INC.            |
| H3388       | CAPITAL DISTRICT PHYSICIANS' HEALTH PLAN, INC.  | H3706       | GLOBALHEALTH, INC.                                |
| H3404       | BLUE CROSS AND BLUE SHIELD OF NORTH CAROLINA    | H3748       | AETNA BETTER HEALTH OF WASHINGTON, INC.           |
| H3416       | HEALTHPARTNERS UNITYPOINT HEALTH, INC.          | H3749       | UNITEDHEALTHCARE OF OKLAHOMA, INC.                |
| H3418       | UNITEDHEALTHCARE INSURANCE COMPANY OF NEW YORK  | H3755       | COMMUNITYCARE GOVERNMENT PROGRAMS, INC.           |
| H3442       | UNITEDHEALTHCARE INSURANCE COMPANY OF ILLINOIS  | H3777       | EXPERIENCE HEALTH, INC.                           |
| H3447       | HEALTHKEEPERS, INC.                             | H3794       | CARE IMPROVEMENT PLUS WISCONSIN INSURANCE COMPANY |
| H3449       | BLUE CROSS AND BLUE SHIELD OF NORTH CAROLINA    | H3805       | UNITEDHEALTHCARE OF OREGON, INC.                  |
| H3464       | UNITEDHEALTHCARE OF ARKANSAS, INC.              | H3810       | ALLCARE HEALTH PLAN, INC.                         |
| H3471       | HEALTH ALLIANCE NORTHWEST HEALTH PLAN           | H3811       | SAMARITAN HEALTH PLANS, INC.                      |
| H3499       | COORDINATED CARE CORPORATION                    | H3813       | MODA HEALTH PLAN, INC.                            |
| H3528       | CONNECTICARE, INC.                              | H3814       | ATRIO HEALTH PLANS                                |
| H3533       | HUMANA HEALTH COMPANY OF NEW YORK, INC.         | H3815       | ALIGNMENT HEALTH PLAN                             |
| H3536       | MATTHEW THORNTON HEALTH PLAN, INC.              | H3817       | REGENCE BLUECROSS BLUESHIELD OF OREGON            |
| H3554       | USABLE PPO INSURANCE COMPANY                    | H3822       | HEALTH CARE SERVICE CORPORATION                   |
| H3557       | BLUE CROSS & BLUE SHIELD OF RHODE ISLAND        | H3832       | HAWAII MEDICAL SERVICE ASSOCIATION                |
| H3561       | HEALTH NET COMMUNITY SOLUTIONS, INC.            | H3864       | PACIFICSOURCE COMMUNITY HEALTH PLANS              |
| H3597       | AETNA HEALTH INC. (ME)                          | H3890       | HOPKINS HEALTH ADVANTAGE, INC.                    |
| H3653       | PARAMOUNT CARE, INC.                            | H3907       | UPMC HEALTH PLAN, INC.                            |
| H3655       | COMMUNITY INSURANCE COMPANY                     | H3909       | QCC INSURANCE COMPANY                             |
| H3660       | SUMMACARE INC.                                  | H3916       | HIGHMARK SENIOR HEALTH COMPANY                    |
| H3664       | AULTCARE HEALTH INSURING CORPORATION            | H3923       | CAPITAL ADVANTAGE INSURANCE COMPANY               |

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| Contract ID        | Contract Name                                      | Contract ID | Contract Name                                      |
|--------------------|--|-------------|--|
| H3924              | GEISINGER INDEMNITY INSURANCE COMPANY              | H4279       | UPMC FOR YOU, INC                                  |
| H3928              | AETNA HEALTH INC. (LA)                             | H4304       | UNIVERSITY OF UTAH HEALTH INSURANCE PLANS          |
| H3931              | AETNA HEALTH INC. (PA)                             | H4343       | CENTENE VENTURE COMPANY ALABAMA HEALTH PLAN, INC.  |
| H3949              | BRAVO HEALTH PENNSYLVANIA, INC.                    | H4346       | HMO COLORADO, INC.                                 |
| H3952              | KEYSTONE HEALTH PLAN EAST, INC.                    | H4388       | SECURITY HEALTH PLAN OF WISCONSIN, INC.            |
| H3954              | GEISINGER HEALTH PLAN                              | H4407       | HEALTHSPRING LIFE & HEALTH INSURANCE COMPANY, INC. |
| H3957              | HIGHMARK CHOICE COMPANY                            | H4461       | CARITEN HEALTH PLAN INC.                           |
| H3959              | AETNA HEALTH INC. (PA)                             | H4497       | MEDICAL MUTUAL OF OHIO                             |
| H3962              | KEYSTONE HEALTH PLAN CENTRAL, INC.                 | H4506       | SELECTCARE OF TEXAS, INC.                          |
| H3975              | WELLCARE HEALTH INSURANCE COMPANY OF KENTUCKY, INC | H4513       | HEALTHSPRING LIFE & HEALTH INSURANCE COMPANY, INC. |
| H3979              | GHS HEALTH MAINTENANCE ORGANIZATION, INC.          | H4514       | UNITEDHEALTHCARE COMMUNITY PLAN OF TEXAS, L.L.C.   |
| H4003              | MMM HEALTHCARE, LLC                                | H4523       | AETNA HEALTH INC. (TX)                             |
| H4004              | MMM HEALTHCARE, LLC                                | H4527       | PHYSICIANS HEALTH CHOICE OF TEXAS, LLC             |
| H4005              | TRIPLE S ADVANTAGE, INC.                           | H4544       | PEOPLES HEALTH, INC.                               |
| H4007              | HUMANA HEALTH PLANS OF PUERTO RICO, INC.           | H4590       | UNITEDHEALTHCARE BENEFITS OF TEXAS, INC.           |
| H4036              | ANTHEM INSURANCE COMPANIES, INC.                   | H4604       | UNITEDHEALTHCARE OF UTAH, INC.                     |
| H4094              | OPTIMUM CHOICE, INC.                               | H4605       | REGENCE BLUECROSS BLUESHIELD OF UTAH               |
| H4140              | DOCTORS HEALTHCARE PLANS, INC.                     | H4623       | HUMANA REGIONAL HEALTH PLAN, INC.                  |
| H4141              | HUMANA EMPLOYERS HEALTH PLAN OF GEORGIA, INC.      | H4624       | ZING HEALTH OF MICHIGAN, INC.                      |
| H4152              | BLUE CROSS & BLUE SHIELD OF RHODE ISLAND           | H4675       | HEALTHIER NEW JERSEY INSURANCE COMPANY             |
| H4198 <sup>1</sup> | COMMUNITYCARE GOVERNMENT PROGRAMS, INC.            | H4676       | TROY HEALTH, INC.                                  |
| H4213              | USABLE MUTUAL INSURANCE COMPANY                    | H4699       | WELLCARE HEALTH PLANS OF RHODE ISLAND, INC.        |
| H4227              | VISTA HEALTH PLAN, INC.                            | H4709       | BRIGHT HEALTH INSURANCE COMPANY OF FLORIDA         |

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|--------------------|---|-------------|---|
| H4711              | COVENTRY HEALTH CARE OF NEBRASKA, INC.      | H5126       | OSCAR INSURANCE COMPANY                           |
| H4754              | PACIFICSOURCE COMMUNITY HEALTH PLANS        | H5140       | BLUE CROSS AND BLUE SHIELD ARIZONA, INC.          |
| H4829              | UHC OF CALIFORNIA                           | H5141       | CLOVER INSURANCE COMPANY                          |
| H4835              | AETNA BETTER HEALTH OF OKLAHOMA INC.        | H5172       | COMMUNITY HEALTH GROUP                            |
| H4847              | WELLCARE OF SOUTH CAROLINA, INC.            | H5190       | SUNSHINE STATE HEALTH PLAN, INC.                  |
| H4853              | BRIGHT HEALTH COMPANY OF ARIZONA            | H5199       | WELLCARE HEALTH INSURANCE OF ARIZONA, INC.        |
| H4868              | WELLCARE OF NEW YORK, INC.                  | H5209       | MY CHOICE WISCONSIN HEALTH PLAN, INC.             |
| H4875              | PRIORITY HEALTH                             | H5211       | SECURITY HEALTH PLAN OF WISCONSIN, INC.           |
| H4882              | HEALTHPARTNERS, INC.                        | H5215       | NETWORK HEALTH INSURANCE CORPORATION              |
| H4909              | ANTHEM INSURANCE COMPANIES, INC.            | H5216       | HUMANA INSURANCE COMPANY                          |
| H4922 <sup>1</sup> | AGEWELL NEW YORK, LLC                       | H5253       | UNITEDHEALTHCARE OF WISCONSIN, INC.               |
| H4931              | BANNER - UNIVERSITY CARE ADVANTAGE          | H5256       | MEDICAL ASSOCIATES CLINIC HEALTH PLAN             |
| H4937              | CALIFORNIA PHYSICIANS' SERVICE              | H5262       | QUARTZ HEALTH PLAN CORPORATION                    |
| H4961              | ALIGNMENT HEALTH PLAN                       | H5264       | DEAN HEALTH PLAN, INC.                            |
| H4982              | AETNA BETTER HEALTH OF CALIFORNIA INC.      | H5273       | CAREPARTNERS OF CONNECTICUT, INC.                 |
| H5008              | UNITEDHEALTHCARE INSURANCE COMPANY          | H5280       | MOLINA HEALTHCARE OF OHIO, INC.                   |
| H5009              | REGENCE BLUESHIELD                          | H5294       | SUPERIOR HEALTHPLAN, INC.                         |
| H5010              | ASURIS NORTHWEST HEALTH                     | H5296       | ALIGNMENT HEALTH PLAN OF NORTH CAROLINA, INC.     |
| H5042              | CDPHP UNIVERSAL BENEFITS, INC.              | H5302       | AETNA HEALTH INC. (GA)                            |
| H5050              | KAISER FOUNDATION HEALTH PLAN OF WASHINGTON | H5322       | CARE IMPROVEMENT PLUS SOUTH CENTRAL INSURANCE CO. |
| H5087              | WELLCARE OF CALIFORNIA, INC.                | H5325       | COVENTRY HEALTH CARE OF KANSAS, INC.              |
| H5106              | HIGHMARK SENIOR SOLUTIONS COMPANY           | H5355       | IEHP HEALTH ACCESS                                |
| H5117              | LOUISIANA HEALTHCARE CONNECTIONS, INC.      | H5386       | SHARP HEALTH PLAN                                 |

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|-------------|---|-------------|--|
| H5398       | CENTENE VENTURE COMPANY KANSAS                    | H5587       | HEALTH CHOICE ARIZONA, INC.                    |
| H5410       | HEALTHSPRING OF FLORIDA, INC.                     | H5590       | BRIDGEWAY HEALTH SOLUTIONS OF ARIZONA, INC.    |
| H5420       | PREFERRED CARE NETWORK, INC.                      | H5591       | MARTIN'S POINT GENERATIONS ADVANTAGE, INC.     |
| H5422       | BLUE CROSS BLUE SHIELD HEALTHCARE PLAN OF GEORGIA | H5593       | AETNA HEALTH OF IOWA INC.                      |
| H5425       | SCAN HEALTH PLAN                                  | H5594       | OPTIMUM HEALTHCARE, INC.                       |
| H5427       | FREEDOM HEALTH, INC.                              | H5599       | NEW YORK QUALITY HEALTHCARE CORPORATION        |
| H5431       | HEALTHSUN HEALTH PLANS, INC.                      | H5608       | DENVER HEALTH MEDICAL PLAN, INC.               |
| H5433       | ORANGE COUNTY HEALTH AUTHORITY                    | H5619       | ARCADIAN HEALTH PLAN, INC.                     |
| H5434       | BLUE CROSS AND BLUE SHIELD OF FLORIDA, INC.       | H5628       | MOLINA HEALTHCARE OF UTAH, INC.                |
| H5435       | UNITEDHEALTHCARE INSURANCE COMPANY                | H5649       | CENTRAL HEALTH PLAN OF CALIFORNIA, INC.        |
| H5439       | HEALTH NET LIFE INSURANCE COMPANY                 | H5652       | SIERRA HEALTH AND LIFE INSURANCE COMPANY, INC. |
| H5471       | SIMPLY HEALTHCARE PLANS, INC.                     | H5703       | SOUTH COUNTRY HEALTH ALLIANCE                  |
| H5475       | MERIDIAN HEALTH PLAN OF MICHIGAN, INC.            | H5746       | AMERIGROUP COMMUNITY CARE OF NEW MEXICO, INC.  |
| H5496       | IMPERIAL HEALTH PLAN OF CALIFORNIA, INC.          | H5774       | TRIPLE S ADVANTAGE, INC.                       |
| H5521       | AETNA LIFE INSURANCE COMPANY                      | H5779       | MERIDIAN HEALTH PLAN OF ILLINOIS, INC.         |
| H5522       | HEALTHASSURANCE PENNSYLVANIA, INC.                | H5793       | AETNA HEALTH INC. (CT)                         |
| H5525       | HUMANA BENEFIT PLAN OF ILLINOIS, INC.             | H5810       | MOLINA HEALTHCARE OF CALIFORNIA                |
| H5526       | HIGHMARK WESTERN AND NORTHEASTERN NEW YORK INC.   | H5823       | MOLINA HEALTHCARE OF WASHINGTON, INC.          |
| H5533       | UPMC HEALTH NETWORK, INC.                         | H5826       | COMMUNITY HEALTH PLAN OF WASHINGTON            |
| H5549       | VNS CHOICE  | H5828       | AMERIGROUP TENNESSEE, INC.                     |
| H5576       | VANTAGE HEALTH PLAN, INC.                         | H5843       | BANNER HEALTH PLAN, INC.                       |
| H5577       | MCS ADVANTAGE, INC.                               | H5852       | AIDS HEALTHCARE FOUNDATION                     |
| H5580       | MERCY CARE  | H5854       | ANTHEM HEALTH PLANS, INC.                      |

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| H5859       | HEALTH PLAN OF CAREOREGON, INC.                 | H6237       | REGENCE BLUECROSS BLUESHIELD OF OREGON            |
| H5883       | BLUE CARE NETWORK OF MICHIGAN                   | H6306       | FIRSTCAROLINACARE INSURANCE COMPANY               |
| H5926       | MOLINA HEALTHCARE OF MICHIGAN, INC.             | H6328       | CARE N' CARE INSURANCE COMPANY, INC.              |
| H5928       | CALIFORNIA PHYSICIANS' SERVICE                  | H6348       | COORDINATED CARE CORPORATION                      |
| H5932       | GATEWAY HEALTH PLAN, INC.                       | H6396       | CARESOURCE OHIO, INC.                             |
| H5937       | UCARE MINNESOTA                                 | H6399       | AETNA BETTER HEALTH INC. (NJ)                     |
| H5938       | CAPITAL HEALTH PLAN                             | H6446       | SILVERSUMMIT HEALTHPLAN, INC.                     |
| H5943       | SCAN HEALTH PLAN                                | H6453       | HMO LOUISIANA, INC.                               |
| H5945       | PROMINENCE HEALTHFIRST                          | H6502       | MISSOURI VALLEY LIFE AND HEALTH INSURANCE COMPANY |
| H5959       | BLUE CROSS AND BLUE SHIELD OF MINNESOTA         | H6526       | UNITEDHEALTHCARE OF NEW MEXICO, INC.              |
| H5965       | WELLCARE HEALTH INSURANCE COMPANY OF WASHINGTON | H6528       | CARE IMPROVEMENT PLUS SOUTH CENTRAL INSURANCE CO. |
| H5969       | ALOHACARE                                       | H6529       | SOUTHEASTERN INDIANA HEALTH ORGANIZATION, INC.    |
| H5970       | HUMANA INSURANCE COMPANY OF NEW YORK            | H6550       | SUNFLOWER STATE HEALTH PLAN, INC.                 |
| H5989       | HEALTHFIRST HEALTH PLAN, INC.                   | H6594       | WELLCARE HEALTH PLANS OF VERMONT, INC.            |
| H5991       | HEALTH INSURANCE PLAN OF GREATER NEW YORK       | H6595       | UNITEDHEALTHCARE OF KENTUCKY, LTD.                |
| H5995       | ATRIO HEALTH PLANS                              | H6622       | HUMANA WI HEALTH ORGANIZATION INSURANCE CORP      |
| H6067       | CAREFIRST ADVANTAGE, INC.                       | H6713       | WELLCARE OF ILLINOIS, INC.                        |
| H6078       | GROUP RETIREE HEALTH SOLUTIONS, INC.            | H6723       | MEDICAL MUTUAL OF OHIO                            |
| H6080       | MERIDIAN HEALTH PLAN OF ILLINOIS, INC.          | H6743       | ATRIO HEALTH PLANS                                |
| H6154       | MEDICA HEALTH PLANS                             | H6750       | HARVARD PILGRIM HEALTH CARE OF NEW ENGLAND, INC.  |
| H6158       | USABLE HMO, INC.                                | H6815       | HEALTH NET HEALTH PLAN OF OREGON, INC.            |
| H6202       | NEXTBLUE OF NORTH DAKOTA INSURANCE COMPANY      | H6830       | CENTENE VENTURE COMPANY KANSAS                    |
| H6229       | BLUE CROSS OF CALIFORNIA PARTNERSHIP PLAN, INC. | H6870       | SUPERIOR HEALTHPLAN, INC.                         |

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|-------------|---|-------------|--|
| H6874       | ASPIRUS HEALTH PLAN, INC.                         | H7330       | ZING HEALTH, INC.                                  |
| H6898       | VERMONT BLUE ADVANTAGE, INC.                      | H7399       | CENTENE VENTURE COMPANY ILLINOIS                   |
| H6910       | MOUNT CARMEL HEALTH PLAN OF IDAHO, INC.           | H7404       | PACIFICARE LIFE ASSURANCE COMPANY                  |
| H6936       | BLUE CROSS & BLUE SHIELD OF ARIZONA, INC.         | H7419       | TUFTS HEALTH PUBLIC PLANS, INC.                    |
| H6975       | WELLCARE OF ALABAMA, INC.                         | H7445       | UNITEDHEALTHCARE OF ILLINOIS, INC.                 |
| H6988       | CENTERS PLAN FOR HEALTHY LIVING, LLC              | H7464       | UNITEDHEALTHCARE OF THE MID-ATLANTIC, INC.         |
| H7006       | ATRIO HEALTH PLANS                                | H7518       | WELLCARE OF MISSOURI HEALTH INSURANCE COMPANY, INC |
| H7020       | CIGNA HEALTHCARE OF SOUTH CAROLINA, INC.          | H7522       | MMM HEALTHCARE, LLC                                |
| H7063       | BLUECROSS BLUESHIELD KANSAS SOLUTIONS, INC.       | H7559       | MAGELLAN COMPLETE CARE OF VIRGINIA, LLC.           |
| H7115       | MEMORIAL HERMANN HEALTH PLAN                      | H7607       | CLEVER CARE OF GOLDEN STATE, INC.                  |
| H7123       | UPMC HEALTH COVERAGE, INC.                        | H7617       | EMPHEYSYS INSURANCE COMPANY                        |
| H7149       | AETNA HEALTH INC. (PA)                            | H7621       | HUMANA HEALTH PLAN OF CALIFORNIA, INC.             |
| H7163       | VANTAGE HEALTH PLAN OF MISSISSIPPI, INC.          | H7646       | PHP MEDICARE                                       |
| H7172       | AETNA BETTER HEALTH INC. (OH)                     | H7678       | MOLINA HEALTHCARE OF TEXAS, INC.                   |
| H7173       | PEACH STATE HEALTH PLAN, INC.                     | H7680       | PROMINENCE HEALTHFIRST OF TEXAS                    |
| H7175       | WELLCARE HEALTH INSURANCE OF NORTH CAROLINA, INC. | H7728       | ANTHEM HEALTH PLANS OF NEW HAMPSHIRE, INC.         |
| H7220       | INDIANA UNIVERSITY HEALTH PLANS NFP, INC.         | H7787       | HEALTHSPRING LIFE & HEALTH INSURANCE COMPANY, INC. |
| H7245       | PREMERA BLUE CROSS                                | H7833       | UNITEDHEALTHCARE COMMUNITY PLAN OF TEXAS, L.L.C.   |
| H7284       | HUMANA HEALTH INSURANCE COMPANY OF FLORIDA, INC.  | H7844       | MOLINA HEALTHCARE OF MICHIGAN, INC.                |
| H7301       | COVENTRY HEALTH CARE OF ILLINOIS, INC.            | H7849       | CIGNA HEALTH AND LIFE INSURANCE COMPANY            |
| H7322       | OSCAR HEALTH PLAN OF NEW YORK, INC.               | H7853       | BRIGHT HEALTH INSURANCE COMPANY                    |
| H7323       | WELLCARE NATIONAL HEALTH INSURANCE COMPANY        | H7885       | SAN MATEO HEALTH COMMISSION                        |
| H7326       | WELLCARE OF SOUTH CAROLINA, INC.                  | H7890       | SANTA CLARA COUNTY HEALTH AUTHORITY                |

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|--------------------|---|-------------|---|
| H7917              | BLUECROSS BLUESHIELD OF TENNESSEE, INC.       | H8213       | SELECT HEALTH OF SOUTH CAROLINA, INC.             |
| H7925              | CENTENE VENTURE COMPANY INDIANA, INC.         | H8225       | CENTENE VENTURE COMPANY FLORIDA                   |
| H7971 <sup>1</sup> | HORIZON INSURANCE COMPANY                     | H8258       | LOCAL INITIATIVE HEALTH AUTHORITY FOR L.A. COUNTY |
| H7993              | DEVOTED HEALTH PLAN OF TEXAS, INC.            | H8298       | HORIZON HEALTHCARE OF NEW JERSEY, INC.            |
| H8003              | BLUECROSS AND BLUESHIELD OF SOUTH CAROLINA    | H8332       | AETNA BETTER HEALTH OF KANSAS, INC.               |
| H8010              | CLOVER HMO OF NEW JERSEY, INC.                | H8343       | AMERIGROUP INSURANCE COMPANY                      |
| H8016              | ORANGE COUNTY HEALTH AUTHORITY                | H8379       | PRIORITY HEALTH CHOICE, INC.                      |
| H8019              | SSM HEALTH PLAN                               | H8423       | MOLINA HEALTHCARE OF TEXAS, INC.                  |
| H8026              | AETNA BETTER HEALTH OF MICHIGAN INC.          | H8432       | EMPIRE HEALTHCHOICE HMO, INC.                     |
| H8046              | MOLINA HEALTHCARE OF ILLINOIS, INC.           | H8452       | CARESOURCE  |
| H8064              | FIRSTCAROLINACARE INSURANCE COMPANY           | H8547       | ILLINOIS BLUE CROSS BLUE SHIELD INSURANCE COMPANY |
| H8087              | HUMANADENTAL INSURANCE COMPANY                | H8552       | ANTHEM BLUE CROSS LIFE AND HEALTH INS COMPANY     |
| H8125              | UNITEDHEALTHCARE INSURANCE COMPANY OF AMERICA | H8553       | WELLCARE HEALTH INSURANCE OF THE SOUTHWEST, INC.  |
| H8130              | MOLINA HEALTHCARE OF FLORIDA, INC.            | H8554       | GHS INSURANCE COMPANY                             |
| H8133              | GHS INSURANCE COMPANY                         | H8578       | HEALTH NEW ENGLAND, INC.                          |
| H8142              | SCOTT AND WHITE HEALTH PLAN                   | H8597       | AETNA BETTER HEALTH OF TEXAS INC.                 |
| H8145              | HUMANA INSURANCE COMPANY                      | H8604       | THP INSURANCE COMPANY                             |
| H8173              | DEVOTED HEALTH PLAN OF ARIZONA, INC.          | H8634       | HEALTH CARE SERVICE CORPORATION                   |
| H8176              | MOLINA HEALTHCARE OF SOUTH CAROLINA, INC      | H8649       | AETNA HEALTH OF UTAH INC                          |
| H8181              | SAPPHIRE EDGE, INC.                           | H8677       | MOLINA HEALTHCARE OF CALIFORNIA                   |
| H8189              | MANAGED HEALTH SERVICES INSURANCE CORP.       | H8711       | WELLCARE HEALTH INSURANCE COMPANY OF NEW JERSEY   |
| H8197              | MOLINA HEALTHCARE OF TEXAS, INC.              | H8748       | UNITEDHEALTHCARE INSURANCE COMPANY                |
| H8211              | MAMSI LIFE AND HEALTH INSURANCE COMPANY       | H8764       | ASPIRE HEALTH PLAN                                |

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|-------------|--|-------------|--|
| H8768       | UNITEDHEALTHCARE INSURANCE CO. OF THE RIVER VALLEY | H9428       | WELLCARE HEALTH INSURANCE OF TENNESSEE, INC.       |
| H8783       | UCARE HEALTH, INC.                                 | H9431       | FIRST HEALTH LIFE & HEALTH INSURANCE COMPANY       |
| H8786       | AMERIGROUP TEXAS, INC.                             | H9455       | HEALTH CHOICE UTAH, INC.                           |
| H8849       | AMERIGROUP INSURANCE COMPANY                       | H9460       | CIGNA HEALTHCARE OF ST LOUIS, INC.                 |
| H8854       | CAREFIRST ADVANTAGE DSNP, INC.                     | H9525       | COMPCARE HEALTH SERVICES INSURANCE CORPORATION     |
| H8889       | MEDICA HEALTH PLANS                                | H9572       | BCBS OF MICHIGAN MUTUAL INSURANCE COMPANY          |
| H8908       | HUMANA MEDICAL PLAN OF MICHIGAN, INC.              | H9576       | NEIGHBORHOOD HEALTH PLAN OF RHODE ISLAND           |
| H8961       | OSCAR MANAGED CARE OF SOUTH FLORIDA, INC           | H9585       | BOSTON MEDICAL CENTER HEALTH PLAN, INC.            |
| H9001       | FALLON COMMUNITY HEALTH PLAN                       | H9615       | MVP HEALTH PLAN, INC.                              |
| H9003       | KAISER FOUNDATION HP OF THE NW                     | H9630       | ARKANSAS HEALTH AND WELLNESS HEALTH PLAN, INC      |
| H9047       | PROVIDENCE HEALTH ASSURANCE                        | H9686       | ALIGNMENT HEALTH PLAN OF NEVADA, INC.              |
| H9065       | AMH HEALTH, LLC                                    | H9699       | HMO PARTNERS, INC.                                 |
| H9070       | COMPBENEFITS INSURANCE COMPANY                     | H9706       | HCSC INSURANCE SERVICES COMPANY                    |
| H9082       | MOLINA HEALTHCARE OF NEW MEXICO, INC.              | H9712       | HAP EMPOWERED HEALTH PLAN, INC.                    |
| H9096       | DEAN HEALTH PLAN, INC.                             | H9725       | CIGNA HEALTHCARE OF NORTH CAROLINA, INC.           |
| H9147       | BLUE CROSS AND BLUE SHIELD OF NC SENIOR HEALTH     | H9730       | WELLCARE HEALTH INSURANCE COMPANY OF KENTUCKY, INC |
| H9207       | HEALTH PARTNERS PLANS, INC.                        | H9808       | CARE N' CARE INSURANCE COMPANY OF NORTH CAROLINA   |
| H9219       | AMH HEALTH PLANS OF MAINE, INC.                    | H9811       | MAGNOLIA HEALTH PLAN, INC.                         |
| H9302       | PREMERA BLUE CROSS                                 | H9834       | QUARTZ HEALTH PLAN MN CORPORATION                  |
| H9335       | WELLCARE HEALTH PLANS OF MISSOURI, INC.            | H9861       | RELIANCE HMO, INC.                                 |
| H9364       | WELLCARE OF MAINE, INC.                            | H9869       | PARTNERS HEALTH PLAN, INC.                         |
| H9387       | SUNFLOWER STATE HEALTH PLAN, INC.                  | H9877       | VIRGINIA PREMIER HEALTH PLAN, INC.                 |
| H9408       | VIBRA HEALTH PLAN, INC.                            | H9952       | MEDICA HEALTH PLANS                                |

<sup>1</sup> MAO is not required to administer the 2022 HOS Cohort 25 Baseline survey due to enrollment less than 500 as of February 1, 2022. MAO administered the Cohort 23 Baseline survey in 2020 and **is required** to administer the Cohort 23 Follow-Up survey in 2022.

| Contract ID | Contract Name                                      | Contract ID | Contract Name                                    |
|-------------|--|-------------|--|
| H9955       | MOLINA HEALTHCARE OF OHIO, INC.                    | R5941       | ANTHEM INSURANCE COMPANIES, INC.                 |
| R0110       | HUMANA INSURANCE COMPANY                           | R6694       | AETNA LIFE INSURANCE COMPANY                     |
| R0759       | UNITEDHEALTHCARE INSURANCE COMPANY                 | R6801       | CARE IMPROVEMENT PLUS OF TEXAS INSURANCE COMPANY |
| R0802       | MARTIN'S POINT GENERATIONS ADVANTAGE, INC.         | R7220       | HUMANA INSURANCE COMPANY                         |
| R0865       | HUMANA INSURANCE COMPANY                           | R7315       | HUMANA INSURANCE COMPANY                         |
| R0923       | HUMANA INSURANCE COMPANY                           | R7444       | UNITEDHEALTHCARE INSURANCE COMPANY               |
| R1390       | HUMANA INSURANCE COMPANY                           |             |  |
| R1532       | HUMANA INSURANCE COMPANY                           |             |  |
| R1548       | UNITEDHEALTHCARE INSURANCE CO. OF THE RIVER VALLEY |             |  |
| R2604       | UNITEDHEALTHCARE INSURANCE COMPANY                 |             |  |
| R3175       | UNITEDHEALTHCARE INSURANCE COMPANY                 |             |  |
| R3332       | BLUE CROSS AND BLUE SHIELD OF FLORIDA, INC.        |             |  |
| R3392       | HUMANA INSURANCE COMPANY                           |             |  |
| R3444       | CARE IMPROVEMENT PLUS SOUTH CENTRAL INSURANCE CO.  |             |  |
| R3887       | HUMANA INSURANCE COMPANY                           |             |  |
| R4182       | HUMANA INSURANCE COMPANY                           |             |  |
| R4487       | ANTHEM INSURANCE COMPANIES, INC.                   |             |  |
| R4845       | HUMANA INSURANCE COMPANY                           |             |  |
| R5329       | SIERRA HEALTH AND LIFE INSURANCE COMPANY, INC.     |             |  |
| R5342       | UNITEDHEALTHCARE INSURANCE COMPANY OF NEW YORK     |             |  |
| R5361       | HUMANA INSURANCE COMPANY                           |             |  |
| R5495       | HUMANA INSURANCE COMPANY                           |             |  |
| R5826       | HUMANA INSURANCE COMPANY                           |             |  |

<sup>1</sup> MAO is not required to administer the 2022 HOS Cohort 25 Baseline survey due to enrollment less than 500 as of February 1, 2022. MAO administered the Cohort 23 Baseline survey in 2020 and **is required** to administer the Cohort 23 Follow-Up survey in 2022.

## ATTACHMENT 2

### FIDE SNPs Voluntarily Reporting in 2022

| Contract ID | PBP ID | Plan Name  | Contract Name                                   | Sampling Notes   |
|-------------|--------|--|---|--|
| H0034       | 002    | Hamaspik Medicare Choice (HMO D-SNP)             | HAMASPIK, INC.                                  | Sample at contract level for quality, then combined FIDE SNP PBP level for frailty |
| H0251       | 004    | UnitedHealthcare Dual Complete ONE (HMO D-SNP)   | UNITEDHEALTHCARE PLAN OF THE RIVER VALLEY, INC. | Sample at contract level for quality, then combined FIDE SNP PBP level for frailty |
| H0321       | 004    | UnitedHealthcare Dual Complete ONE (HMO D-SNP)   | ARIZONA PHYSICIANS IPA, INC.                    | Sample at contract level for quality, then combined FIDE SNP PBP level for frailty |
| H0913       | 013    | WellCare Liberty (HMO D-SNP)                     | WELLCARE HEALTH PLANS OF NEW JERSEY, INC.       | Sample at contract level for quality, then at PBP level for frailty (HOS-M)        |
| H1032       | 175    | WellCare Liberty (HMO D-SNP)                     | Sunshine State Health Plan, Inc.                | Sample at contract level for quality, then at PBP level for frailty (HOS-M)        |
| H1032       | 176    | WellCare Liberty (HMO D-SNP)                     | Sunshine State Health Plan, Inc.                | Sample at contract level for quality, then at PBP level for frailty (HOS-M)        |
| H1350       | 009    | True Blue Special Needs Plan (HMO D-SNP)         | BLUE CROSS OF IDAHO CARE PLUS, INC.             | Sample at contract level for quality, then at PBP level for frailty (HOS-M)        |
| H1350       | 025    | True Blue Special Needs Plan (HMO D-SNP)         | BLUE CROSS OF IDAHO CARE PLUS, INC.             | Sample at contract level for quality, then at PBP level for frailty (HOS-M)        |
| H1416       | 035    | WellCare Access (HMO D-SNP)                      | HARMONY HEALTH PLAN, INC.                       | Sample at contract level for quality, then at PBP level for frailty (HOS-M)        |
| H1610       | 001    | Aetna Better Health of Virginia (HMO D-SNP)      | COVENTRY HEALTH CARE OF VIRGINIA, INC.          | Sample at contract level for quality, then at PBP level for frailty (HOS-M)        |
| H1732       | 001    | Empire MediBlue HealthPlus Dual Plus (HMO D-SNP) | HEALTHPLUS HP, LLC                              | Sample at contract level for quality, then at PBP level for frailty (HOS-M)        |
| H2034       | 001    | Community Care's Partnership Program (HMO D-SNP) | COMMUNITY CARE HEALTH PLAN, INC.                | Sample at contract level for quality and frailty                                   |
| H2134       | 001    | Allwell Dual Medicare (HMO D-SNP)                | WESTERN SKY COMMUNITY CARE, INC.                | Sample at contract level for quality, then at PBP level for frailty (HOS-M)        |
| H2134       | 003    | Allwell Dual Medicare Harmony (HMO D-SNP)        | WESTERN SKY COMMUNITY CARE, INC.                | Sample at contract level for quality, then at PBP level for frailty (HOS-M)        |



| Contract ID | PBP ID | Plan Name  | Contract Name                                    | Sampling Notes   |
|-------------|--------|--|--|--|
| H2168       | 002    | VillageCareMAX Medicare Total Advantage (HMO D-SNP)        | VILLAGE SENIOR SERVICES CORPORATION              | Sample at contract level for quality, then combined FIDE SNP PBP level for frailty |
| H2174       | 001    | Trillium Advantage Dual (HMO D-SNP)                        | TRILLIUM COMMUNITY HEALTH PLAN, INC.             | Sample at contract level for quality and frailty                                   |
| H2224       | 001    | Senior Whole Health (HMO D-SNP)                            | SENIOR WHOLE HEALTH, LLC                         | Sample at contract level for quality, then at PBP level for frailty (HOS-M)        |
| H2224       | 003    | Senior Whole Health NHC (HMO D-SNP)                        | SENIOR WHOLE HEALTH, LLC                         | Sample at contract level for quality, then at PBP level for frailty (HOS-M)        |
| H2225       | 001    | Senior Care Options Program (HMO D-SNP)                    | COMMONWEALTH CARE ALLIANCE, INC.                 | Sample at contract level for quality and frailty (HOS-M)                           |
| H2226       | 003    | UnitedHealthcare Senior Care Options NHC (HMO D-SNP)       | UNITEDHEALTHCARE INSURANCE COMPANY               | Sample at contract level for quality, then combined FIDE SNP PBP level for frailty |
| H2237       | 007    | iCare Family Care Partnership (HMO D-SNP)                  | INDEPENDENT CARE HEALTH PLAN, INC.               | Sample at contract level for quality, then combined FIDE SNP PBP level for frailty |
| H2416       | 001    | PrimeWest Senior Health Complete (HMO D-SNP)               | PRIMEWEST RURAL MN HEALTH CARE ACCESS INITIATIVE | Sample at contract level for quality and frailty                                   |
| H2417       | 001    | IMCare Classic (HMO D-SNP)                                 | ITASCA MEDICAL CARE                              | Sample at contract level for frailty only; no quality reporting                    |
| H2419       | 001    | SeniorCare Complete (HMO D-SNP)                            | SOUTH COUNTRY HEALTH ALLIANCE                    | Sample at contract level for quality and frailty                                   |
| H2422       | 002    | HealthPartners Minnesota Senior Health Options (HMO D-SNP) | HEALTHPARTNERS, INC.                             | Sample at contract level for quality and frailty                                   |
| H2425       | 001    | SecureBlue (HMO D-SNP)                                     | BLUE PLUS  | Sample at contract level for quality and frailty (HOS-M)                           |
| H2456       | 002    | UCare's Minnesota Senior Health Options (HMO D-SNP)        | UCARE MINNESOTA                                  | Sample at contract level for quality and frailty (HOS-M)                           |
| H2458       | 002    | Medica DUAL Solution (HMO D-SNP)                           | MEDICA HEALTH PLANS                              | Sample at contract level for quality and frailty (HOS-M)                           |
| H2563       | 004    | Optima Community Complete (HMO D-SNP)                      | OPTIMA HEALTH PLAN                               | Sample at contract level for quality, then combined FIDE SNP PBP level for frailty |
| H2879       | 001    | Molina Medicare Complete Care (HMO D-SNP)                  | MOLINA HEALTHCARE OF WISCONSIN, INC.             | Sample at contract level for quality, then combined FIDE SNP PBP level for frailty |
| H2915       | 002    | Allwell Dual Medicare (HMO D-SNP)                          | PENNSYLVANIA HEALTH & WELLNESS, INC.             | Sample at contract level for quality, then at PBP level for frailty (HOS-M)        |



| Contract ID | PBP ID | Plan Name  | Contract Name                         | Sampling Notes   |
|-------------|--------|--|---------------------------------------|--|
| H2915       | 007    | Allwell Dual Medicare (HMO D-SNP)                | PENNSYLVANIA HEALTH & WELLNESS, INC.  | Sample at contract level for quality, then at PBP level for frailty (HOS-M)        |
| H3240       | 024    | Amerivantage Dual Secure (HMO-POS D-SNP)         | AMERIGROUP NEW JERSEY, INC.           | Sample at contract level for quality, then at PBP level for frailty (HOS-M)        |
| H3259       | 001    | BlueCare Plus (HMO D-SNP)                        | VOLUNTEER STATE HEALTH PLAN           | Sample at contract level for quality, then combined FIDE SNP PBP level for frailty |
| H3259       | 002    | BlueCare Plus Choice (HMO D-SNP)                 | VOLUNTEER STATE HEALTH PLAN           | Sample at contract level for quality, then combined FIDE SNP PBP level for frailty |
| H3347       | 002    | Elderplan For Medicaid Beneficiaries (HMO D-SNP) | ELDERPLAN, INC.                       | Sample at contract level for quality, then at PBP level for frailty (HOS-M)        |
| H3347       | 007    | Elderplan Plus Long Term Care (HMO D-SNP)        | ELDERPLAN, INC.                       | Sample at contract level for quality, then at PBP level for frailty (HOS-M)        |
| H3359       | 034    | Healthfirst CompleteCare (HMO D-SNP)             | HEALTHFIRST HEALTH PLAN, INC.         | Sample at contract level for quality, then combined FIDE SNP PBP level for frailty |
| H4922       | 003    | AgeWell New York FeelWell (HMO D-SNP)            | AGEWELL NEW YORK, LLC                 | Sample at contract level for frailty; Follow-Up only quality reporting             |
| H4931       | 013    | Banner - University Care Advantage (HMO D-SNP)   | BANNER - UNIVERSITY CARE ADVANTAGE    | Sample at contract level for quality, then combined FIDE SNP PBP level for frailty |
| H4931       | 014    | Banner - University Care Advantage (HMO D-SNP)   | BANNER - UNIVERSITY CARE ADVANTAGE    | Sample at contract level for quality, then combined FIDE SNP PBP level for frailty |
| H4931       | 015    | Banner - University Care Advantage (HMO D-SNP)   | BANNER - UNIVERSITY CARE ADVANTAGE    | Sample at contract level for quality, then combined FIDE SNP PBP level for frailty |
| H4931       | 016    | Banner - University Care Advantage (HMO D-SNP)   | BANNER - UNIVERSITY CARE ADVANTAGE    | Sample at contract level for quality, then combined FIDE SNP PBP level for frailty |
| H5209       | 002    | My Choice Wisconsin Partnership Plan (HMO D-SNP) | My Choice Wisconsin Health Plan, Inc. | Sample at contract level for quality, then combined FIDE SNP PBP level for frailty |
| H5294       | 010    | Allwell Medicare Nurture (HMO D-SNP)             | SUPERIOR HEALTHPLAN, INC.             | Sample at contract level for quality, then at PBP level for frailty (HOS-M)        |
| H5294       | 015    | Allwell Dual Medicare Harmony (HMO D-SNP)        | SUPERIOR HEALTHPLAN, INC.             | Sample at contract level for quality, then at PBP level for frailty (HOS-M)        |

| Contract ID | PBP ID | Plan Name  | Contract Name                           | Sampling Notes   |
|-------------|--------|--|---|--|
| H5425       | 010    | SCAN Connections (HMO D-SNP)                     | SCAN HEALTH PLAN                        | Sample at contract level for quality, then at PBP level for frailty (HOS-M)        |
| H5425       | 030    | SCAN Connections at Home (HMO D-SNP)             | SCAN HEALTH PLAN                        | Sample at contract level for quality, then at PBP level for frailty (HOS-M)        |
| H5549       | 003    | VNSNY CHOICE Total (HMO D-SNP)                   | VNS CHOICE                              | Sample at contract level for quality, then combined FIDE SNP PBP level for frailty |
| H5580       | 004    | Mercy Care Advantage (HMO D-SNP)                 | MERCY CARE                              | Sample at contract level for quality, then at PBP level for frailty (HOS-M)        |
| H5599       | 001    | Fidelis Dual Advantage Flex (HMO D-SNP)          | NEW YORK QUALITY HEALTHCARE CORPORATION | Sample at contract level for quality, then at PBP level for frailty (HOS-M)        |
| H5599       | 003    | Fidelis Medicaid Advantage Plus (HMO D-SNP)      | NEW YORK QUALITY HEALTHCARE CORPORATION | Sample at contract level for quality, then at PBP level for frailty (HOS-M)        |
| H5628       | 001    | Molina Medicare Complete Care (HMO D-SNP)        | MOLINA HEALTHCARE OF UTAH, INC.         | Sample at contract level for quality, then at PBP level for frailty (HOS-M)        |
| H5628       | 008    | Molina Medicare Complete Care (HMO D-SNP)        | MOLINA HEALTHCARE OF UTAH, INC.         | Sample at contract level for quality, then at PBP level for frailty (HOS-M)        |
| H5628       | 012    | Molina Medicare Complete Care Select (HMO D-SNP) | MOLINA HEALTHCARE OF UTAH, INC.         | Sample at contract level for quality, then at PBP level for frailty (HOS-M)        |
| H5703       | 001    | AbilityCare (HMO D-SNP)                          | SOUTH COUNTRY HEALTH ALLIANCE           | Sample at contract level for quality and frailty                                   |
| H5828       | 001    | Amerivantage Full Dual Coordination (HMO D-SNP)  | AMERIGROUP TENNESSEE, INC.              | Sample at contract level for quality, then at PBP level for frailty (HOS-M)        |
| H5992       | 007    | Senior Whole Health of New York NHC (HMO D-SNP)  | SENIOR WHOLE HEALTH OF NEW YORK, INC.   | Sample at contract level for frailty only; no quality reporting                    |
| H6399       | 001    | Aetna Assure Premier Plus (HMO D-SNP)            | AETNA BETTER HEALTH INC. (NJ)           | Sample at contract level for quality and frailty (HOS-M)                           |
| H6550       | 004    | Allwell Dual Medicare (HMO D-SNP)                | SUNFLOWER STATE HEALTH PLAN, INC.       | Sample at contract level for quality, then at PBP level for frailty (HOS-M)        |
| H6550       | 009    | Wellcare Dual Liberty (HMO D-SNP)                | SUNFLOWER STATE HEALTH PLAN, INC.       | Sample at contract level for quality, then at PBP level for frailty (HOS-M)        |
| H6776       | 002    | RiverSpring MAP (HMO D-SNP)                      | ELDERSERVE HEALTH, INC.                 | Sample at contract level for frailty only; no quality reporting                    |
| H6988       | 002    | Centers Plan for Dual Coverage Care (HMO D-SNP)  | CENTERS PLAN FOR HEALTHY LIVING, LLC    | Sample at contract level for quality, then combined FIDE SNP PBP level for frailty |

| <b>Contract ID</b> | <b>PBP ID</b> | <b>Plan Name</b>   | <b>Contract Name</b>                           | <b>Sampling Notes</b>  |
|--------------------|---------------|--|--|--|
| H6988              | 004           | Centers Plan for Medicaid Advantage Plus (HMO D-SNP)     | CENTERS PLAN FOR HEALTHY LIVING, LLC           | Sample at contract level for quality, then combined FIDE SNP PBP level for frailty |
| H7464              | 005           | UnitedHealthcare Dual Complete ONE (HMO D-SNP)           | UNITEDHEALTHCARE OF THE MID-ATLANTIC, INC.     | Sample at contract level for quality, then combined FIDE SNP PBP level for frailty |
| H7464              | 007           | UnitedHealthcare Dual Complete ONE (HMO D-SNP)           | UNITEDHEALTHCARE OF THE MID-ATLANTIC, INC.     | Sample at contract level for quality, then combined FIDE SNP PBP level for frailty |
| H7559              | 001           | Magellan Complete Care of Virginia, LLC (HMO D-SNP)      | MAGELLAN COMPLETE CARE OF VIRGINIA, LLC.       | Sample at contract level for quality and frailty                                   |
| H8298              | 001           | Horizon NJ TotalCare (HMO D-SNP)                         | HORIZON HEALTHCARE OF NEW JERSEY, INC.         | Sample at contract level for quality and frailty                                   |
| H9066              | 003           | Nascentia Dual Advantage (HMO D-SNP)                     | VISITING NURSE ASSOCIATION OF CENTRAL NEW YORK | Sample at contract level for frailty only; no quality reporting                    |
| H9869              | 001           | PHP Care Complete FIDA-IDD Plan (Medicare-Medicaid Plan) | Partners Health Plan                           | Sample at contract level for quality and frailty (HOS-M)                           |
| H9877              | 001           | Virginia Premier Advantage Elite (HMO D-SNP)             | VIRGINIA PREMIER HEALTH PLAN, INC.             | Sample at contract level for quality and frailty                                   |

## ATTACHMENT 3

### Conditionally-Approved Medicare Health Outcomes Survey Vendors\*

| Survey Vendor Contact Information   |   |
|---|---|
| <p><b>Center for the Study of Services (CSS)</b><br/>                     Alok Shrestha<br/>                     1625 K Street, NW, Suite 800<br/>                     Washington, DC 20006<br/>                     Tel: (202) 454-3055<br/> <a href="mailto:ashrestha@cssresearch.org">ashrestha@cssresearch.org</a><br/> <a href="http://www.cssresearch.org">www.cssresearch.org</a></p>  | <p><b>DataStat, Inc.</b><br/>                     Allison Zapor<br/>                     3975 Research Park Drive<br/>                     Ann Arbor, MI 48108<br/>                     Tel: (734) 994-0540, x190<br/> <a href="mailto:azapor@datastat.com">azapor@datastat.com</a><br/> <a href="http://www.datastat.com">www.datastat.com</a></p>                                       |
| <p><b>Market Decisions Research</b><br/>                     Nathaniel Mildner<br/>                     511 Congress St, Suite 801<br/>                     Portland, ME 04101<br/>                     Tel: (530) 355-5578<br/> <a href="mailto:nmildner@marketdecisions.com">nmildner@marketdecisions.com</a><br/> <a href="http://www.marketdecisions.com">www.marketdecisions.com</a></p> | <p><b>SPH Analytics</b><br/>                     Vicki Sheheane<br/>                     11605 Haynes Bridge Road, Suite 400<br/>                     Alpharetta, GA 30009<br/>                     Tel: (470)-394-3059<br/> <a href="mailto:vicki.sheheane@sphanalytics.com">vicki.sheheane@sphanalytics.com</a><br/> <a href="http://www.sphanalytics.com">www.sphanalytics.com</a></p> |

### Conditionally-Approved Medicare Health Outcomes Survey—Modified Survey Vendors\*

| Survey Vendor Contact Information  |   |
|--|---|
| <p><b>Center for the Study of Services (CSS)</b><br/>                     Alok Shrestha<br/>                     1625 K Street, NW, Suite 800<br/>                     Washington, DC 20006<br/>                     Tel: (202) 454-3055<br/> <a href="mailto:ashrestha@cssresearch.org">ashrestha@cssresearch.org</a><br/> <a href="http://www.cssresearch.org">www.cssresearch.org</a></p> | <p><b>DataStat, Inc.</b><br/>                     Allison Zapor<br/>                     3975 Research Park Dr.<br/>                     Ann Arbor, MI 48108<br/>                     Tel: (734) 994-0540, x190<br/> <a href="mailto:azapor@datastat.com">azapor@datastat.com</a><br/> <a href="http://www.datastat.com">www.datastat.com</a></p> |

\*Contingent on successful completion of HOS survey vendor training in May 2022.

**ATTACHMENT 4**  
**Sample Text for Use in a Member Newsletter**  
**Encouraging Members to Complete the HOS**

The Medicare Health Outcomes Survey (HOS) was created by the Centers for Medicare & Medicaid Services (CMS), the federal agency that runs Medicare, to monitor and improve the quality of care you receive. Members of every health plan are randomly selected to receive this survey in the mail.

The HOS monitors the quality of care we provide to our members by asking questions about your health status over a specific period of time.

If you receive this survey in the mail, please complete it! Your responses will help CMS make sure that you receive high-quality care.