Managed Care Organization (MCO) Scorecard
Frequently Asked Questions

What is the purpose of the Scorecard?

The purpose of the Scorecard is to help you choose a managed care organization (MCO) based on the factors that are most important to you. The Scorecard gives you information about how current members feel about their MCO and how well MCOs meet state standards. The Scorecard also provides contact information and other facts about the MCOs that are available for you to choose from.

Where does the information in the Scorecard come from?

Information in the Scorecard comes from a variety of sources:

- **Member Survey** section shows results from the state's annual member satisfaction survey
- **Quality and Compliance** section shows results from the state's annual MCO quality compliance review
- **Care Team Characteristics** section and Additional Information section show information reported by the MCOs about their organization

What is the member satisfaction survey?

The member satisfaction survey is an annual set of questions mailed to current members of each MCO to gather feedback on their experience with their MCO. The state collects and analyzes survey responses to find out how happy members are with their care team, how engaged they are in creating their care plan, and how well their MCO helps to meet their needs.

What is the MCO quality compliance review?

The MCO quality compliance review is an assessment that captures how well MCOs meet certain performance standards set by the state. It is conducted every year by an external quality review organization that works with the state. The external quality review organization looks to make sure that the MCO has policies, procedures, and processes in place to deliver high-quality services to members.

What do nonprofit and for profit mean?

The Type of Agency section in the Scorecard describes which type of organization each MCO is. A nonprofit organization is a group organized for purposes other than generating a profit and in which no part of the organization's income is distributed to its directors or officers. A for profit organization is a business that operates for the purpose of making a profit.

When was the Scorecard last updated? How frequently is it updated?

The Scorecard was last updated in 2022. It is updated annually.

Why doesn't the Scorecard provide other information about MCOs I am interested in?

The Scorecard presents only information that has been validated by the state. The ratings provided in the Scorecard are based on only the most current verifiable data, providing you with the most objective factors to help you make your MCO selection.

2023 Managed Care Organization (MCO) Scorecard
Measures Guide

MEMBER SURVEY	
Measure	**Overall Satisfaction**
Data Source	2021 Satisfaction Survey—a combined score using responses from the following survey questions: 1. Can you contact your care team when you need to? 2. How often do you get the help you need from your care team? 3. How clearly does your care team explain things to you? 4. How carefully does your care team listen to you? 5. How respectfully does your care team treat you? 6. How well did your care team explain the self-directed supports option to you? 7. How involved are you in making decisions about your care plan? 8. How well does your care plan support the activities that you want to do in your community, including visiting with family and friends, working, volunteering, and so on? 9. How much does your care plan include the things that are important to you? 10. Overall, how respectfully do the people who provide you with supports and services treat you? 11. How well do the supports and services you receive meet your needs? 12. Overall, how much do you like your MCO?
Rating System	<table><tr><th>Score</th><th>Stars</th><th>Rating</th></tr><tr><td>90.0% - 100.0%</td><td>5</td><td>Excellent</td></tr><tr><td>80.0% - 89.9%</td><td>4</td><td>Very Good</td></tr><tr><td>70.0% - 79.9%</td><td>3</td><td>Good</td></tr><tr><td>60.0% - 69.9%</td><td>2</td><td>Fair</td></tr><tr><td>< 60.0%</td><td>1</td><td>Poor</td></tr></table> Percentage of all survey question responses that are "Very Satisfied" or "Extremely Satisfied."

Measure	Care Team Responsiveness
Data Source	2021 Satisfaction Survey—a combined score using responses from the following survey questions: 1. Can you contact your care team when you need to? 2. How often do you get the help you need from your care team?
Rating System	*(table below)*

Score	Stars	Rating
90.0% - 100.0%	5	Excellent
80.0% - 89.9%	4	Very Good
70.0% - 79.9%	3	Good
60.0% - 69.9%	2	Fair
< 60.0%	1	Poor

Percentage of survey question responses that are "Very Satisfied" or "Extremely Satisfied."

Measure	Care Team Quality of Communication
Data Source	2021 Satisfaction Survey – a combined score using responses from the following survey questions: 1. How clearly does your care team explain things to you? 2. How carefully does your care team listen to you? 3. How respectfully does your care team treat you?
Rating System	*(table below)*

Score	Stars	Rating
90.0% - 100.0%	5	Excellent
80.0% - 89.9%	4	Very Good
70.0% - 79.9%	3	Good
60.0% - 69.9%	2	Fair
< 60.0%	1	Poor

Percentage of survey question responses that are "Very Satisfied" or "Extremely Satisfied."

QUALITY AND COMPLIANCE	
Measure	**Overall Quality Standards**
Data Source	2021-2022 external quality review organization quality compliance review (QCR) This score comes from combining MCO performance on metrics related to: • **Member-Centered Care Delivery**: How well the MCO does offering member-centered care planning, timely access to services, member choice, and protection of member rights. • **Quality Management**: How well the MCO does at supporting access to services and providers, as well as improving processes to minimize gaps or delays in services. • **Grievance System**: How well the MCO does at working with members to resolve disputes and keeping them informed throughout the process.
Rating System	

Score	Stars	Rating
90.0% - 100.0%	5	Excellent
80.0% - 89.9%	4	Very Good
70.0% - 79.9%	3	Good
60.0% - 69.9%	2	Fair
< 60.0%	1	Poor

Percentage of QCR points earned out of the total number of QCR points possible. This is calculated as all points earned in the 2021-2022

	Member-Centered Care Delivery section and all points earned in the 2021-2022 Quality Management and Grievance System sections, divided by the total number of points possible in each section.
Measure	**Member-Centered Care Delivery**
Data Source	2021-2022 external quality review organization quality compliance review (QCR) MCO Standards Section **How well the MCO does offering member-centered care planning, timely access to services, member choice, and protection of member rights.**
Rating System	<table><tr><th>Score</th><th>Stars</th><th>Rating</th></tr><tr><td>90.0% - 100.0%</td><td>5</td><td>Excellent</td></tr><tr><td>80.0% - 89.9%</td><td>4</td><td>Very Good</td></tr><tr><td>70.0% - 79.9%</td><td>3</td><td>Good</td></tr><tr><td>60.0% - 69.9%</td><td>2</td><td>Fair</td></tr><tr><td>< 60.0%</td><td>1</td><td>Poor</td></tr></table> Percentage of scoring element points earned, out of the number of scoring element points possible, in the QCR MCO Standards Section.
Measure	**Quality Management**
Data Source	2011–2022 external quality review organization quality compliance review (QCR) Quality Assurance and Process Improvement Section **How well the MCO does at supporting access to services and providers, as well as improving processes to minimize gaps or delays in services**

Rating System	Score	Stars	Rating
	90.0% - 100.0%	5	Excellent
	80.0% - 89.9%	4	Very Good
	70.0% - 79.9%	3	Good
	60.0% - 69.9%	2	Fair
	< 60.0%	1	Poor

Percentage of all items in QCR Quality Assurance and Process Improvement section that achieved criteria of "Met" or "Partially Met."

Measure	**Grievance System**

Data Source	2011–2022 external quality review organization quality compliance review (QCR) Grievance System Section **How well the MCO does at working with members to resolve disputes and keeping them informed throughout the process**

Rating System	Score	Stars	Rating
	90.0% - 100.0%	5	Excellent
	80.0% - 89.9%	4	Very Good
	70.0% - 79.9%	3	Good
	60.0% - 69.9%	2	Fair
	< 60.0%	1	Poor

Percentage of all items in QCR Grievance System section that achieved criteria of "Met" or "Partially Met."

CARE TEAM CHARACTERISTICS	
Measure	**Care Manager Turnover**
Data Source	2019–2021 annual data reported to the Wisconsin Department of Health Services by MCOs
Rating System	<table><tr><td>**Score**</td><td>**Stars**</td><td>**Rating**</td></tr><tr><td>0.0% - 10.0%</td><td>5</td><td>Excellent</td></tr><tr><td>10.1% - 20.0%</td><td>4</td><td>Very Good</td></tr><tr><td>20.1% - 30.0%</td><td>3</td><td>Good</td></tr><tr><td>30.1% - 40.0%</td><td>2</td><td>Fair</td></tr><tr><td>> 40.0%</td><td>1</td><td>Poor</td></tr></table> Percentage of care managers that separated from the MCO, calculated as a three-year average. A lower turnover percentage indicates fewer staff leave the MCO within a year, so a smaller percentage of turnover is favorable and corresponds to a higher star rating.
Measure	**Nurse Turnover**
Data Source	2019–2021 annual data reported to the Wisconsin Department of Health Services by MCOs
Rating System	<table><tr><td>**Score**</td><td>**Stars**</td><td>**Rating**</td></tr><tr><td>0.0% - 10.0%</td><td>5</td><td>Excellent</td></tr><tr><td>10.1% - 20.0%</td><td>4</td><td>Very Good</td></tr><tr><td>20.1% - 30.0%</td><td>3</td><td>Good</td></tr><tr><td>30.1% - 40.0%</td><td>2</td><td>Fair</td></tr><tr><td>> 40.0%</td><td>1</td><td>Poor</td></tr></table> Percentage of nurses that separated from the MCO, calculated as a three-year average. A lower turnover percentage indicates fewer staff leave the MCO within a year, so a smaller percentage of turnover is favorable and corresponds to a higher star rating.

Measure	Care Manager to Member Ratio
Data Source	Ratio is reported as of July 1, 2022, based on staff full-time equivalents (FTE) and enrollment. The staff to member ratio expresses a comparison between the number of staff in the MCO to the number of members in the MCO. "1:x" is interpreted as: For every 1 care manager, there are x members. A lower ratio indicates that there are fewer MCO members to each care manager, whereas a higher ratio indicates that there are more MCO members to each care manager.
Rating System	No ratings are assigned for staff to member ratios. All MCO staff ratios are in compliance with state standards.
Measure	**Nurse to Member Ratio***
Data Source	Ratio is reported as of July 1, 2022, based on staff full-time equivalents (FTE) and enrollment. The staff to member ratio expresses a comparison between the number of staff in the MCO to the number of members in the MCO. "1:x" is interpreted as: For every 1 care manager, there are x members. A lower ratio indicates that there are fewer MCO members to each care manager, whereas a higher ratio indicates that there are more MCO members to each care manager.
Rating System	No ratings are assigned for staff to member ratios. All MCO staff ratios are in compliance with state standards.

*Nurse Practitioners are also part of the Family Care Partnership member's care team, although their staff ratio is not included here. |