

# **DEPARTMENT OF HEALTH SERVICES**

Division of Medicaid Services P-02484-26 (12/2025)

# 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 2025. 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.

# Managed Care Organization (MCO) Measure Guides

MEMBER SURVEY				
Measure	Overall Satisfaction			
Data Source	2024 Satisfaction Survey—a combined score using response from the following survey questions:			
	<ol> <li>Can you contact your care team when you need to?</li> <li>When asking for help, how often do you get the help you need from your care team?</li> </ol>			
	3. How satisfied are you with getting clear explanations about your care plan from your care team?			
	4. When you speak with your care team, how well do they listen to you?			
	5. How kindly does your care team treat you?			
	6. How satisfied are you with getting clear			
	explanations about the self-directed supports (SDS)			
	option from your care team?  7. To make sure you are the focus of your care plan, how much does your care team involve you in the planning, development, and communication of your care plan?			
	8. How well does your care plan support the activities that you want to do in your community, such as visiting with family and friends, working, and volunteering?			
	9. How often does your care plan include the			
	things that are important to you?			
	10. How kindly 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 satisfied are you with your managed care organization?			

# Rating System

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

Score	Stars	Rating	
95.0% - 100%	5	Excellent	
90.0% - 94.9%	4.5	Excellent	
85.0% - 89.9%	4	Very Good	
80.0% - 84.9%	3.5	Very Good	
75.0% - 79.9%	3	Good	
70.0% - 74.9%	2.5	Good	
65.0% - 69.9%	2	Fair	
60.0% - 64.9%	1.5	Fair	
< 60.0%	1	Poor	

Data Source  2024 Satisfaction Survey— responses from the follow  1. Can you contact your care 2. When asking for help, how need from your care team?	ving survey questions:  team when you need to?  v often do you get the help you				
, ,	Percentage of survey question responses that are "Very Satisfied" or "Extremely Satisfied."				
Score Sta	ars Rating				
95.0% - 100% 5	Excellent				
90.0% - 94.9% 4.5	5 Excellent				
85.0% - 89.9% 4	Very Good				
80.0% - 84.9% 3.5	5 Very Good				
75.0% - 79.9% 3	Good				
70.0% - 74.9% 2.5	5 Good				
65.0% - 69.9% 2	Fair				
60.0% - 64.9% 1.5	5 Fair				
< 60.0% 1	Poor				

Measure	Care Team Quality of Communication			
Data Source	2024 Satisfaction Survey – a combined score using responses from the following survey questions:  3. How satisfied are you with getting clear explanations			
	<ul><li>about your care plan from your care team?</li><li>4. When you speak with your care team, how well do they listen to you?</li><li>5. How kindly does your care team treat you?</li></ul>			
Rating System	Percentage of survey question responses that are "Very Satisfied" or "Extremely Satisfied."			
	Score	Stars	Rating	
	95.0% - 100%	5	Excellent	
	90.0% - 94.9%	4.5	Excellent	
	85.0% - 89.9%	4	Very Good	
	80.0% - 84.9%	3.5	Very Good	
	75.0% - 79.9%	3	Good	
	70.0% - 74.9%	2.5	Good	
	65.0% - 69.9%	2	Fair	
	60.0% - 64.9%	1.5	Fair	
	< 60.0% 1 Poor			

QUALITY AND COMPLIANCE				
Measure	Overall Quality Standards			
Data Source	2023-2025 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			
	<ul> <li>MCO does offering member-centered care planning, timely access to services, member choice, and protection of member rights.</li> <li>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.</li> </ul>			
	Grievance System: How well the MCO does at working with members to resolve disputes and keeping them informed throughout the process.			

# Rating System Percentage of QCR points earned out of the total number of QCR points possible. This is calculated as all points earned in the 2022-2023 Member-Centered Care Delivery section and all points earned in the 2023-2024 Quality Management and Grievance System sections, divided by the total number of points possible in each section.

Score	Stars	Rating
95.0% - 100%	5	Excellent
90.0% - 94.9%	4.5	Excellent
85.0% - 89.9%	4	Very Good
80.0% - 84.9%	3.5	Very Good
75.0% - 79.9%	3	Good
70.0% - 74.9%	2.5	Good
65.0% - 69.9%	2	Fair
60.0% - 64.9%	1.5	Fair
< 60.0%	1	Poor

Measure	Member-Centered Care Delivery
Data Source	2024-2025 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.

#### Percentage of scoring element points earned, out of **Rating System** the number of scoring element points possible, in the QCR MCO Standards Section. **Rating Score** Stars Excellent 95.0% - 100% 5 Excellent 90.0% - 94.9% 4.5 85.0% - 89.9% Very Good 80.0% - 84.9% Very Good 3.5 75.0% - 79.9% Good 3 Good 70.0% - 74.9% 2.5 65.0% - 69.9% 2 Fair 60.0% - 64.9% Fair 1.5 < 60.0% 1 Poor Measure **Quality Management** 2023–2024 external quality review organization **Data Source** quality compliance review (QCR) Quality Assurance and Process Improvement Section How well the MCO does at supporting access to

to minimize gaps or delays in services

services and providers, as well as improving processes

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

Score	Stars	Rating
95.0% - 100%	5	Excellent
90.0% - 94.9%	4.5	Excellent
85.0% - 89.9%	4	Very Good
80.0% - 84.9%	3.5	Very Good
75.0% - 79.9%	3	Good
70.0% - 74.9%	2.5	Good
65.0% - 69.9%	2	Fair
60.0% - 64.9%	1.5	Fair
< 60.0%	1	Poor

CARE TEAM CHARACTERISTICS		
Measure Care Manager Turnover		
Data Source	2022–2024 annual data reported to the Wisconsin Department of Health Services by MCOs	

# **Rating System**

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.

<b>Turnover Score</b>	Stars	Rating	
0.0% - 5.0%	5	Excellent	
5.1% - 10.0%	4.5	Excellent	
10.1% - 15.0%	4	Very Good	
15.1% - 20.0%	3.5	Very Good	
20.1% - 25.0%	3	Good	
25.1% - 30.0%	2.5	Good	
30.1 % - 35.0%	2	Fair	
35.1% - 40.0%	1.5	Fair	
>40.0%	1	Poor	

Measure	Nurse Turnover					
Data Source	2022–2024 annual data reported to the Wisconsin Department of Health Services by MCOs					
Rating System	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.					
	Turnover Score	Stars	Rating			
	0.0% - 5.0%	5	Excellent			
	5.1% - 10.0%	4.5	Excellent			
	10.1% - 15.0%					
	15.1% - 20.0% 3.5 Very Good					
	20.1% - 25.0% 3 Good					
	25.1% - 30.0%	2.5	Good			
	30.1 % - 35.0% 2 Fair					
	35.1% - 40.0%	1.5	Fair			
	>40.0%	1	Poor			
Measure	Care Manager to Member Ratio					
Data Source	Ratio is reported as of July 1, 2025, 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, 2025, 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.