Best Practices and Follow Up on Previous Year’s EQR Report Recommendations Attestation

*Please complete, sign, date, and include this attestation as a standalone document within the Contractor’s Best Practices and Follow Up on Previous Year’s EQR Report Recommendations submission. Please note: the Contractor is to complete a separate attestation and submission for each line of business/population.* *As a reminder, the information included within the Contractor’s submission will be included within the EQR Annual Technical Reports (with minimal edits) and posted on the AHCCCS website.*

***This attestation applies to the following Calendar Year:*** [*Calendar Year*]

**The *Contractor’s Best Practices and Follow Up on Previous Year’s EQR Report Recommendations* submission does not include the following:**

Financial, proprietary, and confidential information

Data that do not adhere to the CMS Cell Suppression Policy (e.g., data points with a value less than 11, insufficient numerators and denominators as outlined by the measure technical specifications, etc.)

Vendor names and specific vendor information

Grammatical errors (i.e., incomplete sentences, acronyms that are not clearly defined or are utilized inconsistently, unclear language, use of “we/us/our” in lieu of the health plan name, verb tense, and spelling)

Outdated references (e.g., performance measure names, policy terms, etc.)

Any language, terminology (including jargon), and other information that is not appropriate or easily understood as information included within this submission is intended for inclusion within public facing reports

**The *Contractor’s Best Practices and Follow Up on Previous Year’s EQR Report Recommendations* documents ensure the following are included:**

All included data and information clearly identify the associated timeframe

Clear and accurate reporting of all the previous year’s EQR recommendations

EQR recommendation responses are specific and appropriate to each line of business/population

Each EQR recommendation is discussed clearly and distinctly

Appropriate language as it relates to performance measure standards and guidelines (e.g., inverse measures, measure changes, AHCCCS contract and policy changes/updates)

The three self-identified best practices (processes and/or initiatives that produce optimal results and are intended for widespread adoption/implementation) are specific and appropriate to the line of business/population being reported

Included best practices are reported in alignment with the requirements outlined within the associated checklist (e.g., goals, interventions, results, etc.)

For Contractors with subcontracted health plan(s), the submission documents have been reviewed and revised to ensure language and tense are consistent throughout the submission

All primary/external sources utilized within the body of text are identified, referenced, and cited both within the paragraphs and in the references/work cited section of the submission

**I attest that the indications above are correct and the information included within the associated *Contractor’s Best Practices and Follow Up on Previous Year’s EQR Report Recommendations* is an accurate representation of the QM/PI Program activities. The *Contractor’s Best Practices and Follow Up on Previous Year’s EQR Report Recommendations* submission has been reviewed and approved, as written and submitted.**

***\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_***

***Signature of the Performance/Quality Improvement Manager***

***\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_***

***Date***

***\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_***

***Signature of the Chief Medical Officer***

***\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_***

***Date***