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| **CONTRACTOR:** |  |
| **LINES OF BUSINESS (LOB):** |  |
| **REPORT LENGTH (NOT TO EXCEED SIX PAGES TOTAL):** |  |

The Contractor shall include a comprehensive description of its Centers of Excellence for each element identified below.

The Contractor shall complete column ‘B’, and if applicable, ‘C’.

|  | | | **CONTRACTOR** | | **AHCCCS** | | |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **(A)**  **REQUIREMENTS** | | **(B)**  **FOUND ON PAGE** | **(C)**  **NOTES/**  **COMMENTS** | **(D)**  **YES** | **(E) NO** | **(F)**  **COMMENTS** |
|  | A list of the Contractor’s Centers of Excellence and each Center’s focus. |  |  |  |  |  |
|  | A list of the provider IDs and service address(es) for providers eligible under the Autism Centers of Excellence (to be used for Differential Adjusted Payments). |  |  |  |  |  |
|  | A description of the criteria used to select each Center of Excellence. |  |  |  |  |  |
|  | A description of the Contractor’s initiatives to encourage member utilization. |  |  |  |  |  |
|  | The extent the program focuses on interventions related to social risk factors. |  |  |  |  |  |
|  | The extent the program addresses health equity issues. |  |  |  |  |  |
|  | An evaluation of the effectiveness of the program during the previous year. |  |  |  |  |  |
|  | A description of the program’s most significant barriers. |  |  |  |  |  |
|  | A plan for the current Contract Year, to include:   1. Any changes made based upon the lessons learned from the previous year, 2. The goals and outcome measures for the coming Contract year, and 3. A description of monitoring activities to occur throughout the year. |  |  |  |  |  |