

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 2024. 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.

2025 Managed Care Organization (MCO) Measure Guides

MEMBER SURVEY																																	
Measure	Overall Satisfaction																																
Data Source	<p>2023 Satisfaction Survey—a combined score using responses from the following survey questions:</p> <ol style="list-style-type: none"> 1. Can you contact your care team when you need to? 2. When asking for help, how often do you get the help you need from your care team? 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	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 25%;">Score</th> <th style="width: 15%;">Stars</th> <th style="width: 15%;">Rating</th> </tr> </thead> <tbody> <tr> <td>95.0% - 100%</td> <td>5</td> <td>Excellent</td> </tr> <tr> <td>90.0% - 94.9%</td> <td>4.5</td> <td>Excellent</td> </tr> <tr> <td>85.0% - 89.9%</td> <td>4</td> <td>Very Good</td> </tr> <tr> <td>80.0% - 84.9%</td> <td>3.5</td> <td>Very Good</td> </tr> <tr> <td>75.0% - 79.9%</td> <td>3</td> <td>Good</td> </tr> <tr> <td>70.0% - 74.9%</td> <td>2.5</td> <td>Good</td> </tr> <tr> <td>65.0% - 69.9%</td> <td>2</td> <td>Fair</td> </tr> <tr> <td>60.0% - 64.9%</td> <td>1.5</td> <td>Fair</td> </tr> <tr> <td>< 60.0%</td> <td>1</td> <td>Poor</td> </tr> </tbody> </table> <p style="margin-top: 10px;">Percentage of all survey question responses that are “Very Satisfied” or “Extremely Satisfied.”</p>			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
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Measure	Care Team Responsiveness																																
Data Source	2023 Satisfaction Survey—a combined score using responses from the following survey questions: <ol style="list-style-type: none"> Can you contact your care team when you need to? When asking for help, how often do you get the help you need from your care team? 																																
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QUALITY AND COMPLIANCE

Measure Overall Quality Standards

Data Source 2022-2024 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	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.
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	60.0% - 64.9%	1.5	Fair	
< 60.0%	1	Poor		

Measure Member-Centered Care Delivery

Data Source 2022-2023 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.

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Data Source	<p>2023–2024 external quality review organization quality compliance review (QCR)</p> <p>Quality Assurance and Process Improvement Section</p> <p>How well the MCO does at supporting access to services and providers, as well as improving processes to minimize gaps or delays in services</p>																														

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CARE TEAM CHARACTERISTICS

Measure **Care Manager Turnover**

Data Source 2021–2023 annual data reported to the Wisconsin Department of Health Services by MCOs

Rating System

Turnover Score	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

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 2021–2023 annual data reported to the Wisconsin Department of Health Services by MCOs

Rating System

Turnover Score	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

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, 2024, 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, 2024, 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.