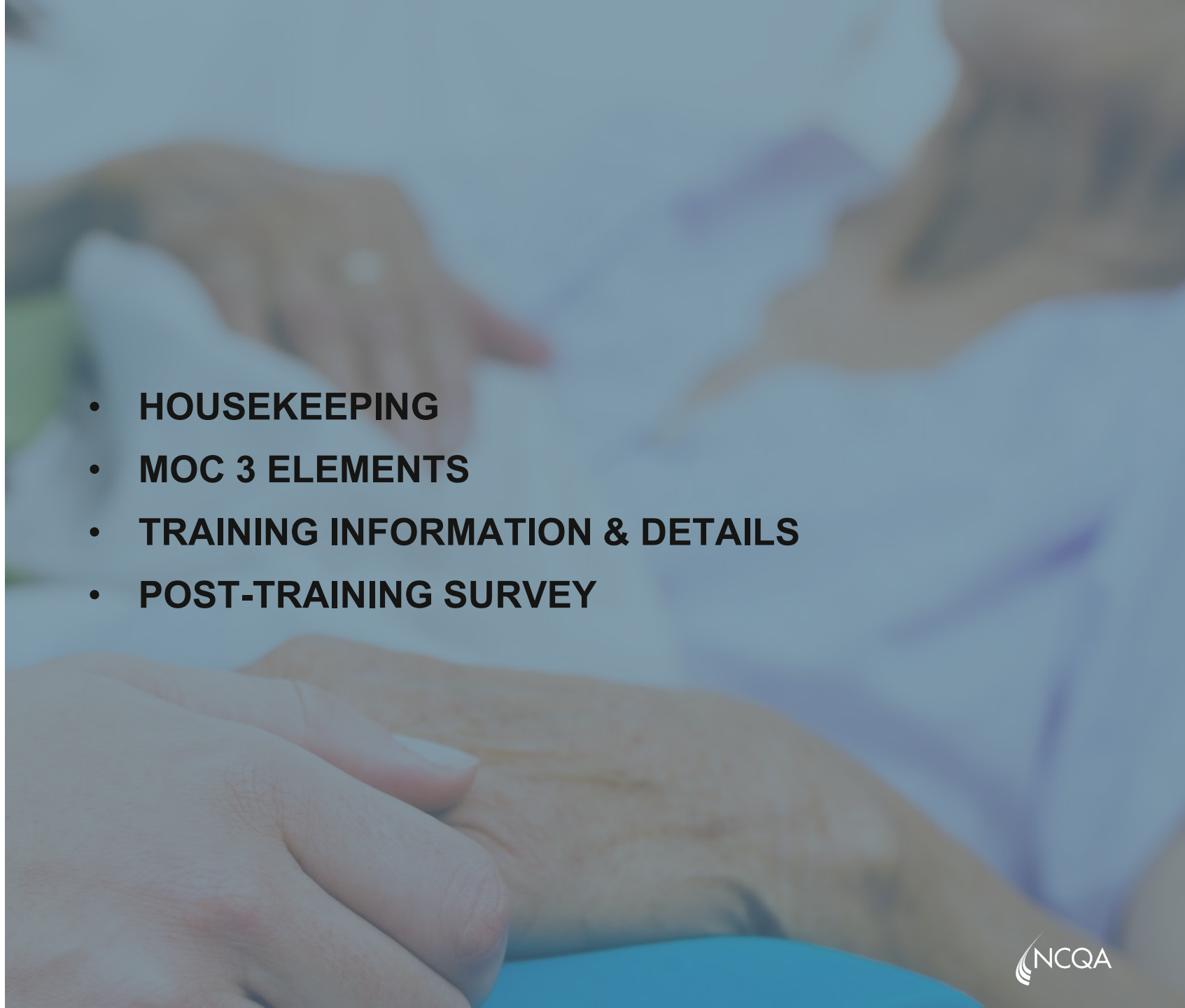
SNP Approval Model of Care Training for CY 2027

MOC 3: Provider Network

February 2026

Agenda

- HOUSEKEEPING
- MOC 3 ELEMENTS
- TRAINING INFORMATION & DETAILS
- POST-TRAINING SURVEY



Training Format

CY 2027

- Training recordings are split by MOC standard. Four recordings are now available – MOC 1, MOC 2, MOC 3, and MOC 4.
- CMS and NCQA will offer two Pre-Submission Technical Assistance (TA) calls to provide plans with an opportunity to ask questions:
  - Call 1: March 19, 2026 (2:00-4:00pm EST)
  - Call 2: April 16, 2026 (2:00-4:00pm EST)
- Plans are encouraged to provide feedback on the CY 2027 training recordings via a link to an online survey provided at the end of each slide deck.

CY 2027 SNP MOC Content Updates

Attention!

- CMS released a new MOC Matrix for CY 2027 and so the CY 2027 Scoring Guidelines were updated to reflect and align with the revised MOC Matrix.
- **Please note that there are substantial revisions and that element and factor requirements have changed for CY 2027.**
- Familiarize yourself with both documents and the training slides to understand the corresponding changes you need to make in your MOC documentation.
- Make sure that your MOC addresses all needed requirements and that element and factor responses are presented in the order specified in the CY 2027 Scoring Guidelines.

Special Symbols

Please Pay Careful Attention to These Items!

 = New for CY 2027

! = Clarified for CY 2027

Note: *Regulations are included within elements, as applicable. We will emphasize these regulations as we review specific elements and related factors.*

CY 2027 Scoring Guidelines

Summary of Changes

- Under each element description in the CY 2027 Scoring Guidelines, changes and clarifications are noted in the “Summary of Changes” section.
- Includes changes and clarifications made for the three most recent versions of the Scoring Guidelines (i.e., CY 2027, CY 2026, CY 2025).
- Updates made for CY 2027 are labelled as ***CY 2027 Updates***.
- Changes and clarifications made in CY 2026 and CY 2025 are not labelled with a specific year.

NCQA SNP Approval Website

Access CY 2027 MOC Scoring Guidelines & Training Recordings

- NCQA SNP Approval Website is located at snpmoc.ncqa.org.
- CY 2027 MOC Scoring Guidelines and MOC Matrix are posted on this website.
- Training recordings are also posted on this website.

SNP Approval Timeline

CY 2027

February 2026

Model of Care Trainings

MOC 1, 2, 3 & 4

March – April 2026

Pre-Submission Technical Assistance (TA) Calls

March 19 (2-4:00pm EST)

April 16 (2-4:00pm EST)

May 2026

Submission Day

May 29 (8:00pm EST)

NCQA Downloads & Reviews Submitted MOCs

June 2026

Final Bids Due to CMS

June 1

July – August 2026

Results Uploaded & NOIDs Sent

August 3 – NOIDs Sent

August 4 – Cure TA Call (2-4:00pm EST)

August 13 – Cure Submissions Due (8:00pm EST)

September 2026

Cure Scores Released

September 1 – CMS Issues Approvals/Denials Following Cure Reviews

Technical Assistance

Get in Touch!

For training recordings and slides, visit the NCQA SNP Approval Website at: https://snpmoc.ncqa.org/trainings.

CY 2027 Resources

- MOC Matrix for CY 2027
- CY 2027 Scoring Guidelines

For inquiries related to the MOC requirements or regulation questions, contact CMS at: https://dpap.lmi.org.

Enter "SNP MOC Inquiry" in the subject line.

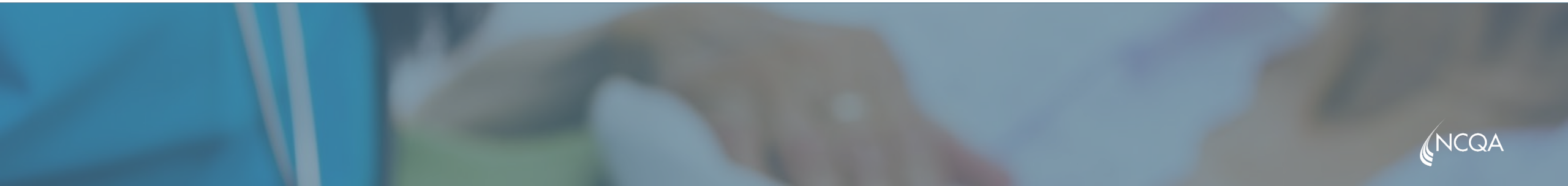
Submit SNP application inquiries via the CMS SNP mailbox.

Type https://dmao.lmi.org, then select the SNP mailbox.

Enter "SNP Application Inquiry" in the subject line.

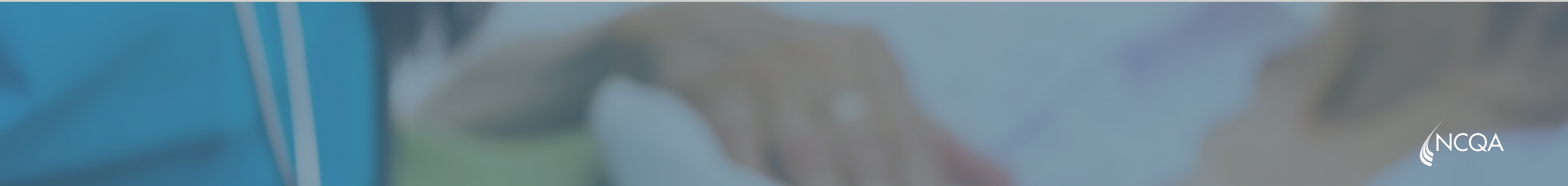
MOC 3

Provider Network



MOC 3, Element A

Specialized Expertise



MOC 3, Element A: CMS Regulations

SNP Networks Must Have Clinical Expertise

- Regulations at 42 CFR § 422.101(f)(1)(ix) and 42 CFR § 422.152(g)(2)(vi) require SNPs to demonstrate that the provider network has specialized clinical expertise in the delivery of care to enrollees. In the management of care, SNPs must use an interdisciplinary team that includes a team of providers with demonstrated expertise and training, and, as applicable, training in a defined role appropriate to their licensure in treating individuals similar to the targeted population of the plan.

MOC 3, Element A

Specialized Expertise

Intent: Demonstrate how the network is designed to address the needs of the SNP's target population and how the SNP ensures providers with demonstrated experience and training in the applicable specialty or area of expertise.

- Describe network providers who see SNP enrollees.
- Include relevant providers and facilities necessary to address the needs of the target population.
- Identify and describe oversight of providers and facilities.
- Describe how network providers collaborate with the ICT (including enrollees) to contribute to the ICP.
- Specify the process and timing for provider directory updates.

★*For CY 2027, factors in MOC 3 Element A were shifted. Please ensure that MOC responses are presented in the order specified in the Scoring Guidelines.*

MOC 3, Element A

Specialized Expertise (Cont'd.)

Factor-Level Details:

1. Describe the specialized expertise of the provider network.
   - *Be sure to include network facilities (in addition to providers).*
   - *Draw a correlation between selected network providers and the needs of the target SNP population.*
2. Describe appropriate provider expertise as it relates to enrollee ICTs and explain the plan's oversight of the provider network.
   - *Include evidence of how the plan creates an ICT for each enrollee comprised of providers with demonstrated experience and training applicable to treating the specific needs of the target population.*
   - *Describe oversight of providers and facilities.*

MOC 3, Element A

Specialized Expertise (Cont'd.)

Factor-Level Details (Cont'd.):

3. Describe how providers collaborate with the ICT, contribute to the enrollee's ICP, and ensure that necessary specialized services are delivered.
   - *Describe how providers communicate enrollee care needs to the ICT.*
   - ★ *Describe how providers in the network collaborate with ICT members and SNP enrollees.*
   - *Specify how reports/documentation about services rendered are shared with the ICT.*
   - *Describe how relevant information is incorporated into the ICP.*
   - ! *Plans may have included this required information under Factor 4 in prior years.*
4. Describe how the SNP documents, updates, and maintains accurate provider information.
   - *Plans must maintain an accurate provider network directory.*
   - *Plans must address process and frequency for updating the provider network directory.*
   - ! *Plans may have included this required information under Factor 3 in prior years.*

MOC 3, Element A – Summary of Changes

Specialized Expertise

Change Description	Type of Change	Impacted Factors	CY 2027 Change?
Switched the order of prior Factor 3 (maintaining accurate provider directory) and prior Factor 4 (facilitating collaboration with the ICT).	Restructure	Factors 3, 4	Yes
For new Factor 3, specified that the plan must also address how providers collaborate with SNP enrollees (in addition to the ICT) and contribute to the ICP.	Clarification/ Addition	Factor 3	Yes
For Factor 4, previously clarified that SNPs must provide the process and frequency for updating provider information.	Clarification	Factor 4	No

Recap: MOC 3, Element A

Specialized Expertise

DO

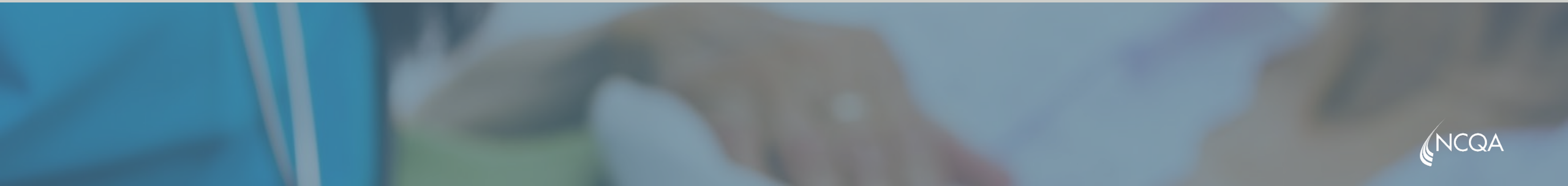
- Describe network and facilities (Factor 1).
- Correlate network to target population (Factor 1).
- Include the process for ensuring providers and facilities have the proper credentials (Factor 2).
- Describe how providers collaborate with the ICT and enrollees (Factor 3).
- Specify how often provider directory updates occur (Factor 4).

DON'T

! Forget to ensure responses are included within the appropriate factors and presented in the order specified in the CY 2027 Scoring Guidelines.

MOC 3, Element B

Clinical Practice Guidelines & Care Transition Protocols



MOC 3, Element B: CMS Regulation

Clinical Practice Guidelines & Care Transition Protocols

- Regulations at 42 CFR § 422.101(f)(2)(iii)-(v) and 42 CFR § 422.152(g)(2)(ix) require SNPs to demonstrate the use of clinical practice guidelines and care transition protocols.

MOC 3, Element B

Clinical Practice Guidelines & Care Transition Protocols

Intent: Describe how the SNP ensures that enrollees receive appropriate, evidence-based care and services.

- Describe the process for ensuring that network providers utilize appropriate clinical practice guidelines and nationally recognized protocols.
- Include the methods used to monitor, track, and verify compliance.
- Provide details on how decisions to modify guidelines or protocols are made for clinically complex enrollees, incorporated into the ICP, and communicated to the ICT.

★*For CY 2027, the number of factors in MOC 3 Element B decreased from 4 to 3. Please ensure that MOC responses are presented in the order specified in the Scoring Guidelines.*

MOC 3, Element B

Clinical Practice Guidelines & Care Transition Protocols (Cont'd.)

Factor-Level Details:

1. Monitor the use of evidence-based clinical guidelines and protocols.
   - ★ *Describe the methods used to monitor, track, and verify compliance with clinical practice guidelines and nationally recognized protocols.*
   - *Examples include electronic databases, web technology, manual medical record review, etc.*
   - *Neither CMS nor NCQA is prescriptive in requiring the use of specific guidelines or protocols.*

MOC 3, Element B

Clinical Practice Guidelines & Care Transition Protocols (Cont'd.)

Factor-Level Details (Cont'd.):

2. Identify challenges where the use of guidelines and nationally recognized protocols need to be modified and detail the decision process to modify guidelines.
   - ★ *Detail how vulnerable SNP enrollees for whom clinical practice guidelines have been modified are overseen.*
   - • *Detail how decisions to modify guidelines are incorporated into the ICP and communicated with the ICT.*
   - • *Specify the person(s) or group/committee responsible for making decisions to modify guidelines to address enrollee needs.*
   - ! *Plans may have included some of this required information under Factor 3 in prior years.*
3. Describe how the SNP oversees care transition protocol implementation.
   - ★ *Detail how care transition protocols are used both internally and by contracted providers to maintain continuity of care.*

MOC 3, Element B – Summary of Changes

Clinical Practice Guidelines & Care Transition Protocols

Change Description	Type of Change	Impacted Factors	CY 2027 Change?
Reduced number of factors from 4 to 3.	Restructure	General	Yes
For Factor 1, specified that plans must describe the methods used to monitor, track, and verify compliance with clinical practice guidelines and nationally recognized protocols.	Clarification	Factor 1	Yes
Combined prior Factor 3 (decision process to modify guidelines) with prior Factor 2 (challenges requiring exceptions to guidelines).	Restructure	Factors 2, 3	Yes
For new Factor 2, specified that plans must detail how they oversee vulnerable SNP enrollees for whom guidelines have been modified.	Addition	Factor 2	Yes
For new Factor 3 (oversight of care transition protocols), specified that plans must explain how care transition protocols are used internally and by contracted providers to maintain continuity of care.	Addition	Factor 3	Yes
Prior Factor 4 (oversight of care transition protocols) shifted to Factor 3.	Restructure	Factor 3	Yes

Recap: MOC 3, Element B

Clinical Practice Guidelines & Care Transition Protocols

DO

★ Describe the methods used to monitor, track, and verify compliance with clinical practice guidelines and nationally recognized protocols (Factor 1).

★ Detail oversight of vulnerable SNP enrollees for whom clinical practice guidelines have been modified (Factor 2).

★ Detail how care transition protocols are used both internally and by contracted providers to maintain continuity of care (Factor 3).

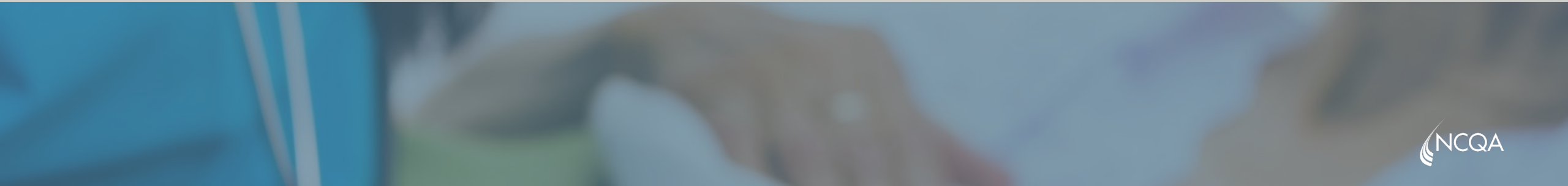
DON'T

- Forget to identify who can modify the use of guidelines (Factor 2).
- Forget to detail how modifications are incorporated to the ICP, as well as how the information is communicated the ICT (Factor 2).

! Forget to ensure responses are included within the appropriate factor and presented in the order specified in the CY 2027 Scoring Guidelines.

MOC 3, Element C

MOC Training for Provider Network Staff



MOC 3, Element C: CMS Regulations

SNPs Must Conduct MOC Training for Provider Network Staff

- Regulations at 42 CFR § 422.101(f)(2)(ii) require that SNPs must conduct MOC training for appropriate staff (employed, contracted, or non-contracted) to coordinate and/or deliver all services and benefits.
- "Provider" includes the following:
  - Network providers and out-of-network provider staff seen by enrollees on a routine basis.
  - Provider staff may include care coordination, administrative, or other clinical or support staff.
- The plan's MOC must describe oversight of provider network training.

MOC 3, Element C

MOC Training for Provider Network Staff

Intent: Describe how the SNP provides MOC training for in-network and out-of-network providers and staff.

- How is training conducted for in-network and out-of-network providers?
- How is evidence of training tracked and documented? Who is responsible for tracking and monitoring completion?
- What challenges are encountered in the completion of MOC provider training?
- What strategies are implemented to support the completion of training requirements?

MOC 3, Element C

MOC Training for Provider Network Staff (Cont'd.)

Factor-Level Details:

1. Describe the implementation of MOC provider training for in-network providers/staff and out-of-network providers/staff seen by enrollees on a routine basis.
   - *Provider staff may include care coordination, administrative, or other clinical or support staff.*
   - ! *How does the organization implement provider training and demonstrate evidence that it makes MOC training available to all "appropriate" in-network and out-of-network providers?*
   - *Detail training methods.*
   - *Renewal Submissions: Provide actual training materials.*
   - *Initial Submissions: Detail training topics covered and/or provide training materials.*

MOC 3, Element C

MOC Training for Provider Network Staff (Cont'd.)

Factor-Level Details (Cont'd.):

2. Describe how the SNP tracks, verifies, and maintains evidence of completion of provider training on the MOC.
   - *Include process for both in-network and out-of-network providers and their staff.*
   - *Evidence may include dated attendee lists, webs-based training confirmation, or attestations.*
3. Describe challenges associated with the completion of MOC training for network providers and out-of-network provider staff seen by enrollees on a routine basis.
   - *Address both in-network and out-of-network providers and their staff.*
4. Provide strategies to facilitate training compliance.
   - ★ *For CY 2027, this factor was updated to focus on specific strategies to support training completion.*
   - *Describe methods used to encourage training completion.*

MOC 3, Element C: Factor 1 (Points of Emphasis)

MOC Training for Provider Network Staff

Question: Our MOC training is under development. If the staff training and provider training content is similar/identical, are we expected to duplicate the description under MOC 2 Element A (staff training) for MOC 3 Element C (provider training)?

Answer: While there will be similarities between the general staff MOC training and the provider MOC training, the provider training should include specific information for practitioners/clinicians.

- Provider MOC training materials should be customized for the provider network (e.g., address care coordination, ICP, ICT, care transitions).
- Acceptable for the training materials provided for MOC 2 Element A and MOC 3 Element C to be identical, given that some information is tailored to providers.

MOC 3, Element C – Summary of Changes

MOC Training for Provider Network Staff

Change Description	Type of Change	Impacted Factors	CY 2027 Change?
For Factor 1, previously clarified that provider staff may include care coordination staff, administrative staff, or other clinical or support staff.	Clarification	Factor 1	No
For Factor 4, clarified that plans must address the strategies it will implement to facilitate MOC training completion.	Clarification	Factor 4	Yes

Recap: MOC 3, Element C

MOC Training for the Provider Network

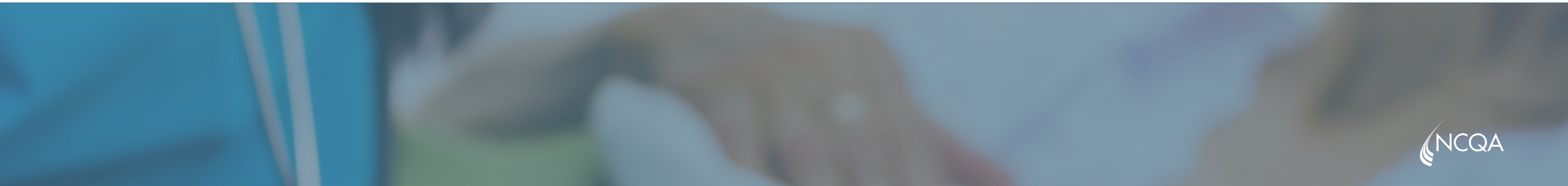
DO

- Address training for both in-network and out-of-network providers (Factors 1-4).
- Mention at least one challenge faced by the plan with respect to training completion by providers both in- and out-of-network (Factor 3).
- ★ Specify strategies to support completion of training requirements (Factor 4).

DON'T

- Limit the content of the training materials to a Table of Contents or general overview (Factor 1).

Training & Education



Training & Education

Sessions Focus on MOC Requirements & Technical Assistance

- **MOC 1, 2, 3, and 4 Trainings**
  - Training recordings currently available.
- **Pre-Submission Technical Assistance (TA) Calls**
  - Call 1: March 19, 2026 (2:00-4:00pm EST)
  - Call 2: April 16, 2026 (2:00-4:00pm EST)
- **Cure TA Call**
  - August 4, 2026 (2:00-4:00pm EST)
  - SNPs scoring <50% on any element or <70% overall.

Note: *Training slides and recordings are available on the NCQA SNP Approval website (snpmoc.ncqa.org).*

Post-Training Survey

We Want Your Feedback!

- The post-training survey is available at the link below: https://www.surveymonkey.com/r/8X26D8J
- We will use survey results to continue to improve future training sessions.
- Thank you! We value your feedback!

Thank you