## 2022 Plan Performance Assessment Procedure Manual

**Contract Number:** 

## Attachment 6: Quality Improvement Corrective Action Plan Follow-up Report

Please complete the below follow-up report for each CAP you submitted following the 2022 QCR Scoring process. Return the completed report to your Health Insurance Specialist by June 30, 2023.

Plan Name	:		
Carrier Codes:			
For each CAP, provide the following information in 750 words or less.  1. Measure:			
I. IVIE	easure:		-
•	to your FEHB Health Insural Are actions on track to mee you taking? What progress metrics are metrics on track with expect	nce Specialist? It the dates provided in the topy our using to track projected sted progress to date?	oort of the Action Outline submitted imeline? If not, what remedies are improvement results? Are these
FEHB Carrie	er Quality Improvement POC	;	
Drints d No.		Signatura	Data
Printed Na	ne	Signature	Date