



**CENTERS FOR MEDICARE & MEDICAID SERVICES**

---

**DATE:** August 7, 2015

**TO:** Medicare-Medicaid Plans

**FROM:** Sharon Donovan  
Director, Medicare-Medicaid Coordination Office Program Alignment Group  
Amy K. Larrick  
Acting Director, Medicare Drug Benefit and C & D Data Group

**SUBJECT:** Updates for Contract Year 2015 Medicare-Medicaid Plan Reporting Requirements

In June 2015, CMS released a memo requesting comments on the updated Medicare-Medicaid Capitated Financial Alignment Model Reporting Requirements: Illinois-Specific Reporting Requirements. Below is a high-level summary of the changes that were made to the Contract Year 2015 Illinois State-Specific Reporting Requirements based on the comments received and the release of the quality withhold technical notes for Demonstration Year 1 for the Illinois specific measures.

Please note, with the release of the final specifications for IL5.1, MMAI plans will be required to submit contract year 2014 data for this measure by September 30, 2015.

Please contact the Medicare-Medicaid Coordination Office at [mmcocapsreporting@cms.hhs.gov](mailto:mmcocapsreporting@cms.hhs.gov) if you have any questions.

---

**Introduction**

- New guidance was added regarding Core Measure 9.2 – Nursing Facility (NF) Diversion to identify individuals enrolled in the MMP as “nursing home certifiable,” or meeting the nursing facility level of care (NF LOC). A definition of “nursing home certifiable” was provided as well as a list of data sources used to identify members.
- New guidance was added to clarify when and how MMAI plans can count assessments completed in the organization’s Integrated Care Program (ICP) product.

### **Measure IL2.2**

- Data elements C and G were revised to reflect the contractual requirement that five attempts to reach a member be made within 60 days of enrollment.
- Language was added to the Notes section to clarify how to report members who initially could not be reached after five outreach attempts within 60 days of enrollment, but then subsequently could be contacted and either completed an assessment or refused the assessment within 90 days of enrollment.
- Specifications for the quality withhold analysis were added to the QA Checks/Thresholds section.

### **Measure IL3.2**

- Specifications for the quality withhold analysis were added to the QA Checks/Thresholds section.

### **Measure IL5.1**

- Language was removed from the Notes section to clarify that the ADA Compliance or Quality Officer does not have to report to the MMP Compliance Officer.
- Specifications for the quality withhold analysis were added to the QA Checks/Thresholds section.