



**CENTERS FOR MEDICARE & MEDICAID SERVICES**

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**DATE:** August 18, 2016

**TO:** Medicare-Medicaid Plans in Michigan

**FROM:** Lindsay Barnette  
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Medicare-Medicaid Coordination Office

**SUBJECT:** Revised Michigan-Specific Reporting Requirements, Value Sets Workbook, and Quality Withhold Technical Notes

The purpose of this memorandum is to announce the release of the revised Medicare-Medicaid Capitated Financial Alignment Model Reporting Requirements: Michigan-Specific Reporting Requirements, the revised Michigan State-Specific Value Sets Workbook, and the revised Michigan-Specific Quality Withhold Technical Notes for Demonstration Year (DY) 1.

As noted in the August 10, 2016 HPMS memorandum titled “Update to CY 2016 Core Reporting Requirements for Medicare-Medicaid Plans,” Core Measure 3.1 was suspended as of the CY 2016 reporting period. However, since this measure is designated as a quality withhold for Michigan Medicare-Medicaid Plans (MMPs), we have transferred the measure specifications to the Michigan-Specific Reporting Requirements under new measure number MI2.6. The Michigan State-Specific Value Sets Workbook was also updated to include the applicable codes for the measure. Michigan MMPs must submit measure MI2.6 for CY 2016 through the web-based FAI Data Collection System used for reporting state-specific measures.

In addition, we have also updated the Michigan-Specific Quality Withhold Technical Notes for DY 1 to reflect a new benchmark for the CY 2016 withhold determination. As indicated in the revised technical notes, Michigan MMPs will no longer be evaluated against a numerical benchmark. Instead, Michigan MMPs will earn a pass for the measure through timely and accurate reporting of data according to the measure specifications, plus submission of a narrative that describes the policies and procedures the MMP has implemented in order to meet the intent of the measure and continually improve its performance rate. Michigan MMPs should carefully review the revised technical notes for more information about the CY 2016 narrative requirement.

Should you have any questions about these changes, please contact the Medicare-Medicaid Coordination Office at [mmcocapsreporting@cms.hhs.gov](mailto:mmcocapsreporting@cms.hhs.gov).