

DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
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MEDICARE-MEDICAID COORDINATION OFFICE

DATE: June 22, 2016

TO: Medicare-Medicaid Plans

FROM: Lindsay P. Barnette
Director, Models, Demonstrations & Analysis Group

SUBJECT: Michigan MMPs: Release of Final Contract Year 2017 Model Materials

Attached to this memorandum are the new model materials for CY 2017 developed jointly by CMS and Michigan for Medicare-Medicaid Plans (MMPs) operating in the Michigan Capitated Financial Alignment Model Demonstration. These models have been updated jointly by CMS and Michigan based on feedback received from plans, states, consumers, and other stakeholders and changes to CY 2017 Medicare Advantage and Part D model materials. Michigan MMPs may only use the CY 2017 models for CY 2017.

The following materials are included with this guidance:

- **Member Handbook/Evidence of Coverage (EOC) - Chapters 1-3, 6-8, and 10-12:** As provided in the Medicare Marketing Guidelines (MMG) and the Michigan MMP marketing guidance document, the Member Handbook must be approved and on the plan's website, and ready to be mailed upon request to current or prospective members, by September 30, 2016 (if it is not sent with the ANOC to current members by September 30, 2016). If the plan elects not to send the Member Handbook with the ANOC for current member receipt by September 30, 2016, it must be mailed and received no later than December 31, 2016.
- **Summary of Benefits (SB):** As provided in the MMG and the Michigan MMP marketing guidance document, the SB must be received by current enrollees no later than September 30, 2016 when the plan chooses to send an ANOC without the Member Handbook/Evidence of Coverage (EOC). The SB must be available to current and prospective enrollees and posted on plan websites on September 30, 2016.
- **List of Covered Drugs (Formulary):** As provided in the MMG and the Michigan MMP marketing guidance document, the formulary must be received by current enrollees no later than September 30, 2016, and available to current and prospective enrollees and posted on plan websites on September 30, 2016.

- **Drug-Only MMP Explanation of Benefits (EOB):** Michigan MMPs must use the Drug-Only MMP EOB to satisfy the requirement under 42 CFR 423.128(e) to send enrollees Part D claims information for each month in which they incur any drug claims.

In addition, we expect to issue the following model materials later this spring:

- Member Handbook/Evidence of Coverage (EOC) Chapters 4, 5, and 9
- Provider and Pharmacy Directory
- Member ID Card
- Welcome Letter for Passively Enrolled Individuals (Exhibit 5a)
- Welcome Letter for Individuals Who Opt In (Exhibit 5b)
- Delegated Enrollment Notices:
 - Exhibits 16, 19, and 21 (Combined) - Model Notice to Confirm Voluntary Disenrollment Following Receipt of Transaction Reply Report (TRR), Model Notice for Disenrollment Due to Out of Area Status (No Response to Request for Address Verification), and Model Notice for Disenrollment due to Loss of Medicaid Status or Other State-Specific Eligibility Status - Notification of Involuntary Disenrollment
 - Exhibit 23 - Model Notice to Offer Beneficiary Services, Pending Correction of Erroneous Death Status
 - Exhibit 29 - Model Notice for Enrollment Status Update
 - Exhibit 30 - Model Notice to Research Potential Out of Area Status - Address Verification Form Included
- Denial and Appeals Notices
 - Integrated Denial Notice
 - Notice of Appeal Decision
 - Notice of Our Failure to Make a Coverage Decision

The attached guidance and models will also be posted to the Financial Alignment Initiative website at <http://cms.gov/Medicare-Medicaid-Coordination/Medicare-and-Medicaid-Coordination/Medicare-Medicaid-Coordination-Office/FinancialAlignmentInitiative/InformationandGuidanceforPlans.html>.

We encourage all plans to work closely with their marketing reviewers and Contract Management Team to ensure timely submission and approval of all required CY 2017 materials, as well as timely and complete entry of Actual Mail Dates for ANOCs and Member Handbooks/EOCs. If you have any questions about the contents of this memorandum, please contact the Medicare-Medicaid Coordination Office at mmcocapsmodel@cms.hhs.gov.