

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

DATE: May 26, 2017

TO: Medicare-Medicaid Plans

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

SUBJECT: Ohio MMPs: Release of Final Contract Year 2018 Model Materials

Attached to this memorandum are the new model materials for Contract Year (CY) 2018 developed jointly by CMS and Ohio for Medicare-Medicaid Plans (MMPs) operating in the Ohio Capitated Financial Alignment Model Demonstration. CMS and Ohio jointly updated these models based on feedback received from plans, states, and other stakeholders and changes to CY 2018 Medicare Advantage and Part D model materials. Ohio MMPs may only use the CY 2018 models for CY 2018.

The following materials are included with this guidance:

- **Annual Notice of Change (ANOC):** As provided in the Medicare Marketing Guidelines (MMG) and the Ohio MMP marketing guidance document, the ANOC must be received by current enrollees by September 30, 2017 and posted on plan websites by September 30, 2017.
- **Member Handbook/Evidence of Coverage (EOC) - Chapters 1-3 and 5-11:** As provided in the MMG and the Ohio MMP marketing guidance document, the Member Handbook must only be posted on plan websites by September 30, 2017 if it is sent to current enrollees with the ANOC for receipt by September 30, 2017. If the Member Handbook is sent separately from the ANOC, it must be received by current enrollees by December 31, 2017 and must be posted on plan websites by December 31, 2017.
- **Summary of Benefits (SB):** As provided in the MMG and the Ohio MMP marketing guidance document, the SB must be received by current enrollees no later than September 30, 2017 when the plan chooses to send an ANOC without the Member Handbook/Evidence of Coverage (EOC). The SB must be posted on plan websites by September 30, 2017.
- **Provider and Pharmacy Directory:** As provided in Chapter 4 of the Medicare Managed Care Manual and the Ohio MMP marketing guidance document, the directory (or a separate notice to alert enrollees how to access or receive the directory) must be received

by current enrollees no later than September 30, 2017. The directory must be available to current and prospective enrollees and posted on plan websites by September 30, 2017.

- **List of Covered Drugs (Formulary):** As provided in the MMG and the Ohio MMP marketing guidance document, the formulary must be received by current enrollees no later than September 30, 2017 and available to current and prospective enrollees and posted on plan websites by September 30, 2017.
- **Drug-only MMP Explanation of Benefits (EOB):** Ohio MMPs may 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. Use of this model is optional. Ohio MMPs may instead use the CY 2018 Part D EOB model provided to Part D sponsors at <http://www.cms.gov/Medicare/Prescription-Drug-Coverage/PrescriptionDrugCovContra/Part-D-Model-Marketing-Materials.html>.
- **Member ID Card**
- **Integrated Denial Notice**
- **Notice of Appeal Decision:** Second Notice of Decision – Dual Benefits Members (Overlap MDCR/MDCD Services))
- **Plan-Delegated Enrollment Notices**
 - Exhibit 4: Model Notice to Acknowledge Receipt of Completed Enrollment Request and to Confirm Enrollment
 - Exhibit 5a: Welcome Letter for Passively Enrolled Individuals
 - Exhibit 11: Model Notice to Acknowledge Request to Cancel Enrollment
 - Exhibit 16: Model Notice to Confirm Voluntary Disenrollment from Medicare Services Following Receipt of Transaction Reply Report (TRR)
 - Exhibit 19: Model Notice for Disenrollment Due to Out of Area Status (No Response to Request for Address Verification)
 - Exhibit 21: Model Notice for Disenrollment due to Loss of Demonstration Eligibility Status or Other State-Specific Eligibility Status - Notification of Involuntary Disenrollment
 - Exhibit 27: Model Acknowledgement of Reinstatement
 - Exhibit 28: Acknowledgement of Request to Opt Out of Passive Enrollment for Medicare Services (not connected to request to disenroll or cancel enrollment in MMP)

In addition, we expect to issue the following model material separately:

- Member Handbook/Evidence of Coverage (EOC) – Chapter 4

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 2018 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.