



MEDICARE-MEDICAID COORDINATION OFFICE

DATE: April 13, 2017

TO: Medicare-Medicaid Plans in Texas

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

SUBJECT: Revised Texas-Specific Reporting Requirements and Value Sets Workbook

The purpose of this memorandum is to announce the release of the revised Medicare-Medicaid Capitated Financial Alignment Model Reporting Requirements: Texas-Specific Reporting Requirements and corresponding Texas-Specific Value Sets Workbook. The documents are designed to provide updated guidance, technical specifications, and applicable codes for the state-specific measures that Texas Medicare-Medicaid Plans (MMPs) are required to collect and report under the demonstration.

Please see below for a high-level summary of the changes that were made to the Texas-Specific Reporting Requirements. Note that the Texas-Specific Value Sets Workbook also includes changes; Texas MMPs should carefully review and incorporate the updated value sets, particularly for measures TX1.3, TX4.3, TX4.4, TX4.5, TX4.7, TX4.9, TX4.11, TX4.13, TX4.14, and TX4.16.

Texas MMPs must use the updated specifications and value sets for measures due on or after May 31, 2017. Should you have any questions, please contact the Medicare-Medicaid Coordination Office at mmcocapsreporting@cms.hhs.gov.

SUMMARY OF CHANGES

Introduction

- In the “Quality Withhold Measures” section, added a reference to quality withhold measures for Demonstration Years (DY) 2 and 3. Also added the DY 2 and 3 quality withhold designation to the relevant measures within the document.

Measure TX1.1

- In the Notes section, added clarification regarding member participation in the Plan of Care for purposes of reporting data element D.

Measure TX1.2

- In the Notes section, added clarification regarding member participation in the Plan of Care for purposes of reporting data element B.

Measure TX1.3

- Revised the Notes section to provide guidance on identifying follow-up visits that are included in bundled payments. Also clarified the steps for identifying inpatient discharges and identifying exclusions for this measure.

Measure TX1.4

- In the Notes section, added additional guidance regarding eligibility for a Plan of Care update for purposes of reporting data element A. Also added guidance regarding classifying the Plan of Care for members with a break in coverage for purposes of reporting data element B.
- As previously communicated by the Texas Help Desk, the CY 2016 submission was delayed for this measure. The new due date for the CY 2016 submission is June 30, 2017 (note that MMPs must use the updated specifications for this submission).

Measure TX3.1

- Revised data elements A and B to more clearly articulate that only newly hired service coordinators (or those newly assigned to the MMP) should be included in the measure.

Measures TX4.1 through TX4.11 (PQI Measures)

- Revised measures TX4.1 – TX4.8 and TX4.10 – TX4.11 to align with updated specifications from the measure steward. Suspended measure TX4.9 since it was retired by the measure steward.
- As previously communicated by the Texas Help Desk, the CY 2016 submissions were delayed for measures TX4.1 – TX4.8 and TX4.10 – TX4.11. The new due date for the CY 2016 submissions is June 30, 2017 (note that MMPs must use the updated specifications for this submission).

Measure TX4.13

- Revised to align with updated specifications from the measure steward (NCQA/HEDIS).

Measure TX4.14

- Revised to align with updated specifications from the measure steward (NCQA/HEDIS).

Measure TX4.16

- Revised to align with updated specifications from the measure steward (NCQA/HEDIS).

Measure TX5.1

- Revised the measure to reflect a change in nursing facility long stay criteria from 100 to 120 days (note that this measure is calculated by Texas HHSC). Since this is a quality withhold measure, the Quality Withhold Technical Notes (DY 1): Texas-Specific Measures document on the CMS website will be updated to reflect this minor change.