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New York FIDA-IDD Medicare-Medicaid Plan

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New York FIDA-IDD MMP: Release of Final Contract Year 2020 Model Materials


The following materials are included with this guidance:

- **Annual Notice of Change (ANOC):** The ANOC must be received by current Participants by September 30, 2019 and posted on the plan’s website by October 15, 2019.

- **Participant Handbook/Evidence of Coverage (EOC) - Chapters 1-12:** The Participant Handbook (or a separate notice to alert Participants how to access or receive the Participant Handbook) must be received by current Participants by October 15, 2019 and posted on the plan’s website by October 15, 2019.

- **Summary of Benefits (SB):** The SB must be available by October 15, 2019, but can be
released as early as October 1, 2019, and posted on the plan’s website by October 15, 2019.

- **Provider and Pharmacy Directory:** The directory (or a separate notice to alert Participants how to access or receive the directory) must be received by current Participants no later than October 15, 2019. The directory must be available to current and prospective Participants and posted on the plan’s website by October 15, 2019.

- **List of Covered Drugs (Formulary):** The formulary (or a separate notice to alert Participants how to access or receive the formulary) must be received by current Participants no later than October 15, 2019 and available to current and prospective Participants and posted on the plan’s website by October 15, 2019.

- **Drug-only Explanation of Benefits:** The New York FIDA-IDD MMP is required to meet the Part D Explanation of Benefits (EOB) requirements under 42 CFR 423.128(e) to send Participants Part D claims information for each month in which they incur any drug claims. The New York FIDA-IDD MMP must meet this requirement by using the New York FIDA-IDD MMP-specific Drug-only EOB model provided by CMS and New York.

- **Participant ID Card**

- **Integrated Denial Notices**
  - Instructions for the Integrated Coverage Determination Notice (ICDN) Models
  - ICDN Model 1: Coverage Determination Notice (Service Plan Update)
  - ICDN Model 2: Coverage Determination Notice (Service Plan Update)
  - ICDN Model 3: Coverage Determination Notice

- **Appeals and Grievance Notices**
  - Appeal Notice 1: Acknowledgment of Appeal
  - Appeal Notice 2: Expedited Appeal Request Denial
  - Appeal Notice 3: In-Person Appeal Review
  - Appeal Notice 4: Appeal Decision Notice (Approval)
  - Appeal Notice 5: Appeal Decision Notice (Denial)
  - Appeal Notice 6: Acknowledgment of Auto-Forward of Appeal
  - Appeal Notice 7: Notice of Appeal Decision Delay
  - Appeal Notice 8: Request for Additional Information
  - Grievance Notice 1: Grievance Decision Notice
  - Grievance Notice 2: Notice of Grievance Delay

- **Plan-Delegated Enrollment Notices**
  - P1 Notice: Exhibit 5a/b (Plan Welcome Letter)
  - P2 Notice: Exhibit 30 (Address Verification Form)
  - P3 Notice: Model Advance Notice of Disruptive Behavior
  - P4 Notice: Model Notice of Request for Involuntary Disenrollment Due to Disruptive Behavior
  - P5 Notice: Model Involuntary Disenrollment Denial Notice

In addition, we expect to issue the three Part D notices separately in the coming weeks.
The attached guidance and models will also be posted to the Financial Alignment Initiative website at https://www.cms.gov/Medicare-Medicaid-Coordination/Medicare-and-Medicaid-Coordination/Medicare-Medicaid-Coordination-Office/FinancialAlignmentInitiative/MMPInformationandGuidance/MMPMarketingInformation andResources.html.

We encourage the plan to work closely with its marketing reviewers and Contract Management Team to ensure timely submission and approval of all required CY 2020 materials, as well as timely and complete entry of Actual Mail Dates for ANOCs. If you have any questions about the contents of this memorandum, please contact the Medicare-Medicaid Coordination Office at MMCOCapsModel@cms.hhs.gov.