



MEDICARE-MEDICAID COORDINATION OFFICE

DATE: April 2, 2019

TO: Medicare-Medicaid Plans

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

SUBJECT: Applicability of CY 2020 Final Call Letter Provisions to Medicare-Medicaid Plans

This memorandum provides additional guidance regarding the applicability to Medicare-Medicaid Plans (MMPs) of the provisions of the Contract Year (CY) 2020 Final Call Letter issued on April 1, 2019. In the chart below, we specify whether a particular provision in the CY 2020 Final Call Letter is: (1) not applicable to MMPs; (2) applicable to MMPs; (3) partly applicable to MMPs; or (4) informational only. For some provisions, comments are provided as further background.

Any questions regarding the contents of this memorandum should be directed to the Medicare-Medicaid Coordination Office at MMCOCapsModel@cms.hhs.gov.

CY 2020 Final Call Letter Provisions and Applicability to Medicare-Medicaid Plans

Final Call Letter Provisions (by section)	Not Applicable to MMPs	Applicable to MMPs	Partly Applicable to MMPs	Informational Only	Comments
Section I – Parts C and D					
Annual Calendar			X		Applicable to MMPs where the “MMP” column is checked in the Call Letter.
Enhancements to the 2020 Star Ratings and Future Measurement Concepts: All Subsections			X		MMPs are required to report on all Part C and D quality measures, including SNP-only and display measures. To the extent that specification changes on individual measures impact plan reporting, MMPs must comply with the specified changes. CMS expects to post additional MMP performance data later this spring at https://www.cms.gov/Medicare-Medicaid-Coordination/Medicare-and-Medicaid-Coordination/Medicare-Medicaid-Coordination-Office/FinancialAlignmentInitiative/CapitatedModel.html .

Final Call Letter Provisions (by section)	Not Applicable to MMPs	Applicable to MMPs	Partly Applicable to MMPs	Informational Only	Comments
Incomplete and Inaccurate Bid Submissions: All Subsections			X		Also refer to Section IV of the Final Call Letter.
Plan Corrections			X		Also refer to Section IV of the Final Call Letter.
Innovations in Health Plan Design: All subsections	X				
Section II: Part C					
Overview of CY 2020 Benefits and Bid Review	X				
Plans with Low Enrollment	X				
Total Beneficiary Cost (TBC)	X				
Maximum Out-of-Pocket (MOOP) Limits	X				
Per Member Per Month (PMPM) Cost Sharing Limits to Address Actuarial Equivalent (AE) Cost Sharing Limits and Anti-Discrimination Standards	X				
Part C Cost Sharing Standards	X				

Final Call Letter Provisions (by section)	Not Applicable to MMPs	Applicable to MMPs	Partly Applicable to MMPs	Informational Only	Comments
Part C Optional Supplemental Benefits	X				
Medicare-covered Opioid Treatment Program Services Beginning in CY 2020		X			
Non-Opioid Pain Management Supplemental Benefits		X			
Supplemental Benefit Clarifications		X			MMPs should note the interpretation and examples of primarily health-related plan-offered supplemental benefits.
Potential Changes to MOOP and Cost Sharing Standards for CY 2021	X				
Special Supplemental Benefits for the Chronically Ill (SSBCI)		X			
Provider Directories	X				
Physical Exam Supplemental Benefit for Special Needs Plans (SNPs)	X				
D-SNP Administrative Alignment Opportunities	X				
D-SNP "Look-alikes"	X				

Final Call Letter Provisions (by section)	Not Applicable to MMPs	Applicable to MMPs	Partly Applicable to MMPs	Informational Only	Comments
Parts A and B Cost Sharing for Individuals Enrolled in the Qualified Medicare Beneficiary (QMB) Program	X				
Medicare Advantage Organizations Crossing Claims over to Medicaid Agencies	X				
Interoperability and Prior Authorization Coordination		X			
Request for Information – Barriers for MA Plans or Providers in using Risk Based Arrangements for Pharmacy Benefits				X	
Section III: Part D					
Formulary Submissions: All Subsections		X			For Part D sponsors offering an MMP, CMS will make the Additional Demonstration Drug (ADD) Validation File available via HPMS in advance of the ADD File submission deadline.
Improving Access to Opioid–Reversal Agents: All Subsections		X			

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Access to Medication-Assisted Treatment		X			
Part D PBP MRx Enhancements	X				
Medication Therapy Management (MTM): All Subsections		X			
Part D Benefit Parameters for Non-Defined Standard Plans: All Subsections	X				
Improving Access to Part D Vaccines		X			
Improving Access to Generic and Biosimilar Medicines		X			
PDP Crosswalk Policy and Solicitation of Comments	X				
Low Enrollment Plans (Stand-alone PDPs only)	X				
PDP Non-Renewal Policy Clarifications	X				

Final Call Letter Provisions (by section)	Not Applicable to MMPs	Applicable to MMPs	Partly Applicable to MMPs	Informational Only	Comments
Improving Drug Utilization Review Controls in Medicare Part D: All Subsections		X			
Coordination of Benefits (COB) User Fee		X			
Part D Mail Order Auto-Ship Modifications		X			
<i>Section IV: Medicare-Medicaid Plans</i>					
Medicare-Medicaid Plan Annual Requirements and Timeline for CY 2020: All Subsections		X			
<i>Appendices</i>					
Appendix 1: Methodology for Plan Finder (PF) Composite Price Accuracy Display Measure			X		