

2014 Medicare Advantage Organization (MAO) Chronic Care Improvement Program (CCIP) and Quality Improvement Project (QIP)

Plan and Annual Update Submissions

Q: What is the window for MAOs to submit 2014 Plan Sections and Annual Updates?

A: The window for MAOs to submit 2014 Plan Sections and Annual Update(s) through the Quality and Performance module in HPMS is November 17, 2014 through November 25, 2014.

Q: Are MAOs that are non-renewing their contracts or SNP-specific plan options, effective Contract Year 2015, required to submit Annual Updates?

A: Yes, MAO that are non-renewing their contracts or SNP-specific plan options, effective Contract Year 2015, are required to submit CCIP/QIP Annual Updates, as they must report accomplishments throughout the past year, while still active.

Q: Are MAOs with contracts or SNP-specific plan options that began on January 1, 2014, but are non-renewing, effective Contract Year 2015, required to submit a Plan Section?

A: No, these MAOs are not required to submit a Plan Section for 2014.

Q: Will CMS share CCIP/QIP best practices and lessons learned from the Annual Updates with the MAOs at a future date?

A: Yes, CMS expects to be able to share some promising approaches and lessons learned based on the 2014 CCIP and QIP Annual Updates.

Plan and Annual Update Requirements

Q: Where are the requirements for the 2014 CCIP/QIP Plan Section and Annual Update submissions located?

A: The requirements for the 2014 CCIP/QIP Plan Section and Annual Update submissions are located in the HPMS User Guides, which are found in the Quality and Performance module in HPMS. Also, the corresponding training slides and audio recordings are available at <http://www.cms.gov/Medicare/Health-Plans/Medicare-Advantage-Quality-Improvement-Program/Overview.html>. MAOs may also submit related questions to CMS at: MAQuality@cms.hhs.gov.

Q: Do plans with approximately 200 members, or otherwise low membership, need to submit CCIPs and QIPs?

A: Yes. All MAOs, regardless of size, are required to conduct CCIP and QIP activities as required by §422.152.

Health Plan Management System (HPMS)

Q: What is the character limits for the CCIP and QIP Plan and Annual Update Modules in HPMS?

A: All large text fields in the Plan and Annual Update modules in HPMS have a 2,500 character limit. Fields with smaller character limits are specified accordingly in HPMS, as well as in the User Guides.

Q: Can MAOs enter results on more than one intervention in the Annual Update Module?

A: Yes. The Annual Update module now has fields in the Results section to enter results for up to three distinct interventions, where applicable.

Q: Does HPMS allow users to enter partial information into the Plan and Annual Update module, and return at a later date to complete their submission(s)?

A: The module does allow for partial entry of the Plan and Annual Update information, enabling users to return at a later time to complete previous entries.

Q: Does the HPMS Plan and Annual Update Module allow the use of symbols when entering information/data?

A: The Plan and Annual Update Module has the same symbol limitations as the rest of HPMS, and include: less than (<), greater than (>), and semi-colon (;). HPMS will allow the use of the percentage (%) symbol.

Q: Does the HPMS module allow users to submit graphs, tables, etc., as part of the Plan Section and Annual Update submission?

A: No, the fields within the Plan Section and Annual Update do not allow for the submission of tables, graphs, etc. Users can upload graphs, tables, etc., as supporting documentation. Note: MAOs must provide all data and corresponding analysis in the designated fields within the Plan Section and Annual Update.

QIP/CCIP Plan Section Revisions

Q: Are MAOs allowed to revise language in their initially approved CCIP/QIP Plan Sections?

A: No, submissions cannot be altered. However, MAOs should continually assess their progress in relation to target goals and modify their original Plan as needed. MAOs should document changes in their Annual Update submission.

HEDIS Measure for Cholesterol Management

Q: How will the retirement of the current HEDIS measure and the new statin guidelines for Cholesterol Management for patients with cardiovascular conditions impact CCIP Initiatives?

A: MAOs should consider incorporating the new statin guidelines into their CCIP initiatives. Some suggested activities could include: ensuring appropriate statin therapy for the four benefit

groups; helping enrollees make lifestyle modifications; and conducting outreach and education to network providers. MAOs should document changes in their Annual Update submission, specifically in the Act Section.

Annual Update: Reporting Results

Q: Can MAOs use more than one source of data to report results, and will the Annual Update section in HPMS accommodate this?

A: Yes, MAOs may use more than one source of data to report results. However, there should be at least one primary data source that is consistent across years.

Q: If an MAO with a new 2014 contract or SNP product is using HEDIS data to measure results, how would it report results for the first Annual Update?

A: MAOs offering a new contract or SNP product in 2014 will likely not have HEDIS data to report for the first Annual Update and should note this in the Annual Update. MAOs may utilize other data sources (if available), such as internal data, to measure progress.

Q: What are the differences in the reporting requirements between the first and second Annual Updates?

A: There are minimal differences between the first and second Annual Update reporting requirements. For the second Annual Update, CMS requires that MAOs explain their educational efforts for year two, and make any appropriate comparisons of results to those reported in the Study section of the first Annual Update.

Reporting Period

Q: What is the “reporting period” for the Annual Update(s)?

A: The timeframe for reporting is “January 1, 2014 through the Annual Update Submission,” which is November 2014, for both the first and second Annual Updates. However, MAOs submitting a second Annual Update may also want to include results and/or other relevant information from the first Annual Update submission.

Annual Update Total Population

Q: Can CMS provide clarification on what is required for the total population?

A: The total population is the combined total number of enrollees in the plan(s) offered by the MAO at the time the Annual Update is due (see note below). If there is significant fluctuation in enrollment during the reporting period, the MAO should explain the change.

Note: With the exception of SNPs, the Annual Updates are submitted by MAOs at the contract level. Therefore, the total population and results will reflect the aggregate number of enrolled beneficiaries and experience across all applicable *non-SNP coordinated care plans under* that contract. For SNPs, the MAO will submit the total population and results *for each SNP individually*.

Annual Update Numerator and Denominator

Q: Can CMS clarify what is required for the numerator and denominator, as it relates to the total population in the Study section of the Annual Update?

A: The numerator is the total number of plan members that met the inclusion criteria (as defined in the Plan Section) and actually received or were impacted by the project intervention(s). The denominator is the total number of plan members that met inclusion criteria and were eligible to receive the project intervention(s).

Miscellaneous

Q: Will CCIP and QIP results eventually be included as a Star Ratings metric?

A: At this time, CMS has made no determination regarding the incorporation of CCIP and QIP results into the Star Ratings metric. In the near term, CMS is focused on evaluating the CCIP and QIP programs and sharing promising approaches and lessons learned with MAOs. However, CMS believes that the CCIP and QIP projects have the potential to positively influence some of the current Star Rating measures.

Q: What is the CCIP and QIP submission process for MMPs?

A: MMPs have separate CCIP and QIP submission requirements specific to their respective State(s). For information about MMP CCIP and QIP submissions, contact the MMCO mailbox at: MMCOcapsmodel@cms.hhs.gov.