



**MEDICARE-MEDICAID COORDINATION OFFICE**

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**DATE:** July 8, 2020

**TO:** Medicare-Medicaid Plans

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

**SUBJECT:** California MMPs: Release of Final Contract Year 2021 Model Materials

Attached to this memorandum are the new model materials for Contract Year (CY) 2021 developed jointly by CMS and California for Medicare-Medicaid Plans (MMPs) operating in the California Capitated Financial Alignment Model Demonstration. CMS and California jointly updated these models as summarized in the CMS memorandum, "Medicare-Medicaid Plan and Minnesota Senior Health Options Plan Member Material Model Updates for Contract Year 2021," dated May 14, 2020 and issued through the Health Plan Management System. California MMPs may only use the CY 2021 models for CY 2021.

As a result of the implementation of CMS-4190-F1, Contract Year 2021 Policy and Technical Changes to the Medicare Advantage Program, Medicare Prescription Drug Benefit Program, and Medicare Cost Plan Program, which may be found in the Final Rule published on June 2, 2020 (see <https://www.federalregister.gov/documents/2020/06/02/2020-11342/medicare-program-contract-year-2021-policy-and-technical-changes-to-the-medicare-advantage-program>), we incorporated related changes into the CY 2021 model materials.

The following materials are included with this guidance:

- **Annual Notice of Changes (ANOC):** The ANOC must be received by current enrollees by September 30, 2020 and posted on plan websites by October 15, 2020. We note there are three versions of the ANOC for: (1) County Organized Health System (COHS) plans, (2) non-COHS plans, and (3) plans operating in Los Angeles County.
- **Member Handbook/Evidence of Coverage (EOC) - Chapters 1-12:** The Member Handbook (or a separate notice to alert enrollees how to access or receive the Member Handbook) must be received by current enrollees by October 15, 2020 and posted on plan websites by October 15, 2020. California has elected to continue requiring a hard copy Member Handbook be provided to new enrollees in California MMPs in CY 2021; current members may receive the Member Handbook electronically. We note there are two versions of Chapter 9 for: (1) plans with Medi-Cal products that are subject to Knox-Keene licensure requirements and (2) plans with Medi-Cal products that are not subject to

Knox-Keene licensure requirements. We note there are three versions of Chapter 10 for: (1) County Organized Health System (COHS) plans, (2) non-COHS plans, and (3) plans operating in Los Angeles County.

- **Summary of Benefits (SB):** The SB must be available by October 15, 2020, but can be released as early as October 1, 2020, and posted on plan websites by October 15, 2020.
- **Provider and Pharmacy Directory:** 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 October 15, 2020. The directory must be available to current and prospective enrollees and posted on plan websites by October 15, 2020.
- **List of Covered Drugs (Formulary):** The formulary (or a separate notice to alert enrollees how to access or receive the formulary) must be received by current enrollees no later than October 15, 2020 and available to current and prospective enrollees and posted on plan websites by October 15, 2020.
- **Member ID Card**
- **Plan-Delegated Enrollment Notices**
  - Exhibit 4: MMP Model Notice to Acknowledge Receipt of Completed Enrollment Request and to Confirm Enrollment (We note there is one version for COHS plans only.)
  - Exhibit 5a: Welcome Letter for Passively Enrolled Individuals (We note there are three versions for: (1) County Organized Health System (COHS) plans, (2) non-COHS plans, and (3) plans operating in Los Angeles County.)
  - Exhibit 5b: Welcome Letter for Individuals Who Opt In (We note there are three versions for: (1) County Organized Health System (COHS) plans, (2) non-COHS plans, and (3) plans operating in Los Angeles County.)
  - Exhibit 11: Acknowledgement of Request to Cancel Enrollment or Enrollment Cancellation due to Enrollment into Another Plan (MMP, MA, or PDP) for the Same Enrollment Effective Date (We note there is one version for COHS plans only.)
  - Exhibit 14: Model Notice to Acknowledge Receipt of Voluntary Disenrollment Request from Member (We note there is one version for COHS plans only.)
  - Exhibit 22: Model Notice for Period of Deemed Continued Eligibility Due to Loss of Medicaid
  - Exhibit 30a: Model Notice to Research Potential Out of Area Status
- **Integrated Denial Notice (IDN):** We note there are two versions of the IDN for: (1) plans with Medi-Cal products that are subject to Knox-Keene licensure requirements and (2) plans with Medi-Cal products that are not subject to Knox-Keene licensure requirements.

The attached guidance and models will also be posted to the Medicare-Medicaid Coordination Office's Information and Guidance for Plans webpage at [www.cms.gov/Medicare-Medicaid-Coordination/Medicare-and-Medicaid-Coordination/Medicare-Medicaid-Coordination-Office/FinancialAlignmentInitiative/MMPInformationandGuidance/MMPMarketingInformationandResources](http://www.cms.gov/Medicare-Medicaid-Coordination/Medicare-and-Medicaid-Coordination/Medicare-Medicaid-Coordination-Office/FinancialAlignmentInitiative/MMPInformationandGuidance/MMPMarketingInformationandResources), grouped alphabetically by state under the "State-Specific Information" heading.

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 2021 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](mailto:MMCOCapsModel@cms.hhs.gov).