

DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
7500 Security Boulevard
Baltimore, Maryland 21244-1850

Date: September 29, 2020
To: Medicare-Medicaid Plans
From: John A. Scott, Director
Medicare Parts C and D Oversight and Enforcement Group
Center for Medicare

Lindsay P. Barnette, Director
Models, Demonstrations, and Analysis Group
Medicare-Medicaid Coordination Office
Subject: Contract Year (CY) 2021 Draft Program Audit Protocols for Medicare-Medicaid Plans (MMPs)

The purpose of this memorandum is to provide organizations an opportunity to comment on the attached 2021 Draft Audit Protocols and Supplemental Questionnaire for MMPs. CMS created the Draft Audit Protocols for MMPs to ensure compliance with three-way contract requirements in the following areas:

- Medicare-Medicaid Plan Care Coordination (MMPCC) Program Area (Formerly known as the Medicare-Medicaid Plan Care Coordination and Quality Improvement Program Effectiveness (CCQIPE) program area)
- Medicare-Medicaid Plan Service Authorization Requests, Appeals, and Grievances (MMP-SARAG) Program Area

CMS has aligned the MMPCC and MMP-SARAG audit protocols with the proposed 2021 Special Needs Plans Care Coordination (SNPCC) program audit protocol and 2021 Part C Organization Determinations, Appeals, and Grievances (ODAG) program audit protocol, respectively, where applicable to the three-way contracts. In alignment with SNPCC, we removed the Quality Improvement Program Effectiveness review for MMPCC. In alignment with ODAG, we created separate compliance standards related to Part B drug request processing timeliness, reduced the number of universes by consolidating standard and expedited cases and external appeal entities' overturn cases, and included non-contract provider payment appeals and dismissals in the universe request.

Please send any comments on the Draft Audit Protocols for MMPs to MMCOCapsModel@cms.hhs.gov using the provided comment template by October 29, 2020.