The purpose of this memorandum is to announce the release of the revised Medicare-Medicaid Capitated Financial Alignment Model Reporting Requirements: New York FIDA-IDD-Specific Reporting Requirements and corresponding New York FIDA-IDD-Specific Value Sets Workbook. These documents provide updated technical specifications and applicable codes for the state-specific measures that the FIDA-IDD Plan is required to collect and report under the demonstration in accordance with Sections 2.14.3.3 and 2.16.2 of the Three-Way Contract. As with prior annual update cycles, CMS and the state revised these documents in an effort to streamline and clarify reporting expectations for the FIDA-IDD Plan.

Please see below for a summary of the substantive changes to the New York FIDA-IDD-Specific Reporting Requirements as compared to the prior version dated February 26, 2021. While there were no changes to the New York FIDA-IDD-Specific Value Sets Workbook, the FIDA-IDD Plan should carefully review the value sets to ensure accurate reporting.

The FIDA-IDD Plan must use the updated specifications and value sets for measures due on or after May 31, 2022. Should you have any questions, please contact the Medicare-Medicaid Coordination Office at mmcocosreporting@hhs.gov.

**SUMMARY OF CHANGES**

**Introduction**
- In the Definitions section, clarified that definitions for terms listed in that section and throughout the Reporting Requirements apply whenever the term is used, unless otherwise noted.
Measure IDD2.2

- In the Notes section, clarified that there is one allowable gap in enrollment for each annual reporting period for data element A.

Measure IDD5.1

- In the Notes section, clarified that an RN assessor can include care managers who are RNs for Column 357.