The purpose of this memorandum is to announce the release of the revised Medicare-Medicaid Capitated Financial Alignment Model Reporting Requirements: Ohio-Specific Reporting Requirements and corresponding Ohio-Specific Value Sets Workbook. These documents provide updated guidance, technical specifications, and applicable codes for the state-specific measures that Ohio Medicare-Medicaid Plans (MMPs) are required to collect and report under the demonstration. As with prior annual update cycles, revisions were made in an effort to streamline and clarify reporting expectations for Ohio MMPs.

Please see below for a summary of the substantive changes to the Ohio-Specific Reporting Requirements. Note that the Ohio-Specific Value Sets Workbook also includes changes; Ohio MMPs should carefully review and incorporate the updated value sets, particularly for measure OH1.3.

Ohio MMPs must use the updated specifications and value sets for measures due on or after June 1, 2020. Should you have any questions, please contact the Medicare-Medicaid Coordination Office at mmcocapsreporting@cms.hhs.gov.

SUMMARY OF CHANGES

Introduction
- In the “Variations from the Core Reporting Requirements Document” section, added Ohio-specific guidance for reporting Core Measure 5.3.

Measure OH1.3
- In the Notes section, revised the hospice exclusion for data element A to reflect that the Hospice value set was replaced with two value sets (Hospice Encounter and Hospice Intervention) and to clarify that supplemental data may be used as well.
Measure OH2.1
- In the Notes section, clarified that waiver service coordinators should be counted in data element A if they were with the MMP for at least 30 days at any point during the reporting period.

Measures OH3.1, OH3.2, and OH3.8
- These measures, which were previously designated as “suspended,” were updated to “retired” since CMS and the state do not intend to reinstate them.