



MEDICARE-MEDICAID COORDINATION OFFICE

DATE: December 7, 2020

TO: Dual Eligible Special Needs Plans

FROM: Sharon Donovan
Director, Program Alignment Group

SUBJECT: OMB-Approved Coverage Decision Letter for Applicable Integrated Plans

The purpose of this memorandum is to announce the release of the OMB-approved Coverage Decision Letter (CMS-10716) and form instructions for Dual Eligible Special Needs Plans (D-SNPs) that are applicable integrated plans (as defined at 42 CFR 422.561) to use starting on January 1, 2021, but no later than January 15, 2021.

Coverage Decision Letter

Applicable integrated plans are a subset of D-SNPs that must meet the unified appeals and grievance procedures defined at 42 CFR 422.629-422.634 for CY 2021. These regulations implement provisions of the Bipartisan Budget Act of 2018. In our November 20, 2020 HPMS memorandum¹, we released the Coverage Decision Letter for applicable integrated plans to send to enrollees when making adverse decisions on integrated organization determinations on or after January 1, 2021. We noted in the November 20, 2020 HPMS memorandum that applicable integrated plans' use of the Coverage Decision Letter was voluntary, rather than legally mandatory, until an OMB control number is available.

OMB recently approved the Coverage Decision Letter for three years and provided a control number; therefore, applicable integrated plans are required to send this letter for adverse decisions on integrated organization determinations. We acknowledge plans need lead time to make updates to how they notify enrollees of adverse decisions; therefore, although applicable integrated plans should begin using this notice on January 1, 2021 if possible, we are providing additional time, until January 15, 2021, for applicable integrated plans to use the Coverage Decision letter in compliance with 42 CFR 422.631. Other D-SNPs that are not applicable integrated plans, as well as all other MA plans, will continue to use the Notice of Denial of Medical Coverage, also known as the Integrated Denial Notice (IDN) (CMS-10003).

The versions of the Coverage Decision Letter and form instructions accompanying this memorandum include the OMB control number and expiration date. We have not made any other updates to these documents from the version we released on November 20, 2020. For more information on the Coverage Decision Letter, please see the November 20, 2020 memorandum.

Resources

¹ See <https://www.cms.gov/files/document/dsnpintegratednoticesmemo.pdf>

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The Coverage Decision Letter will be available at <https://www.cms.gov/Medicare-Medicaid-Coordination/Medicare-and-Medicaid-Coordination/Medicare-Medicaid-Coordination-Office/D-SNPs> along with related model notices, guidance, and other resources.

We encourage plans to contact the Medicare-Medicaid Coordination Office at MMCO_DSNPOperations@cms.hhs.gov or their account manager with any questions on these models or unified grievances and appeals processes.