



MEDICARE-MEDICAID COORDINATION OFFICE

DATE: February 28, 2020

TO: Medicare-Medicaid Plans in Illinois

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

SUBJECT: Revised Illinois-Specific Reporting Requirements and Value Sets Workbook

The purpose of this memorandum is to announce the release of the revised Medicare-Medicaid Capitated Financial Alignment Model Reporting Requirements: Illinois-Specific Reporting Requirements and corresponding Illinois-Specific Value Sets Workbook. These documents provide updated guidance, technical specifications, and applicable codes for the state-specific measures that Illinois 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 Illinois MMPs.

Please see below for a summary of the substantive changes to the Illinois-Specific Reporting Requirements. Note that the Illinois-Specific Value Sets Workbook also includes changes; Illinois MMPs should carefully review and incorporate the updated value sets, particularly for measure IL3.4.

Illinois 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, updated the Illinois-specific guidance regarding data sources for reporting Core Measure 9.2.

Measure IL3.4

- 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 IL4.1

- In the Analysis section, added information about additional calculations that will be used to evaluate reported data.