



**MEDICARE-MEDICAID COORDINATION OFFICE**

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**DATE:** February 28, 2018

**TO:** New York Medicare-Medicaid Plan (FIDA-IDD Plan)

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

**SUBJECT:** Revised New York FIDA-IDD-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: New York FIDA-IDD-Specific Reporting Requirements and corresponding New York FIDA-IDD-Specific Value Sets Workbook. These documents provide updated guidance, technical specifications, and applicable codes for the state-specific measures that the FIDA-IDD Plan is required to collect and report under the demonstration. Many of the updates were made in an effort to clarify and simplify reporting expectations for the FIDA-IDD Plan, consistent with the Administration's commitment to reduce administrative burden and increase efficiency.

Please see below for a summary of the substantive changes to the New York FIDA-IDD-Specific Reporting Requirements. Note that the New York FIDA-IDD-Specific Value Sets Workbook also includes changes; the FIDA-IDD Plan should carefully review and incorporate the updated value sets, particularly for measures IDD1.3 and IDD2.3.

The FIDA-IDD Plan must use the updated specifications and value sets for measures due on or after May 31, 2018. Should you have any questions, please contact the Medicare-Medicaid Coordination Office at [mmcocapsreporting@cms.hhs.gov](mailto:mmcocapsreporting@cms.hhs.gov).

**SUMMARY OF CHANGES**

**Measure IDD1.1**

- Given that all Medicare-Medicaid Plans will report timely care plan completion under the new Core Measure 3.2, removed the data elements under IDD1.1 that captured initial Life Plan (LP) completion. Reordered the remaining data elements as A through D. Revised

the new data element C to clarify that the outreach attempts should be for the purpose of participating in the revised LP.

- Updated the Edits and Validation Checks section, Analysis section, and Notes section to reflect the changes to the data elements.
- Also in the Notes section, reaffirmed that declinations to participate in the LP must be documented by the FIDA-IDD Plan, clarified that the three outreach attempts should be specific to the completion of the LP, added guidance regarding reporting LPs that do not require revisions, and clarified that this measure should only include LPs that were revised with participation from the member.

#### **Measure IDD1.2**

- In the Notes section, clarified that this measure should only include LPs that were developed/revised with participation from the member.

#### **Measure IDD1.3**

- Updated the reporting frequency to annual and the reporting period to calendar year.
- Clarified the data elements, Analysis section, and Notes section to reflect that acute inpatient discharges should be included in this measure.
- Revised the Notes section to provide guidance for excluding nonacute inpatient stays and for using UB Type of Bill codes to further identify inpatient hospital discharges.
- Also in the Notes section, revised the exclusion criteria to differentiate discharges followed by direct transfers/readmissions to acute and nonacute facilities.

#### **Measure IDD1.4**

- In the Notes section, reaffirmed that declinations to participate in the Comprehensive Service Planning Assessment must be documented by the FIDA-IDD Plan.

#### **Measure IDD2.3**

- In the Notes section, clarified the method for identifying the hospice exclusion and added a new reference to the Hospice value set.
- As communicated by the New York FIDA-IDD NORC Help Desk, the submission of the Calendar Year 2017 reporting period was delayed. The updated due date for this submission is May 31, 2018. The FIDA-IDD Plan should use the updated specifications for this submission.