



MEDICARE-MEDICAID COORDINATION OFFICE

DATE: November 16, 2018

TO: Texas Medicare-Medicaid Plans

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

SUBJECT: Texas MMPs: Additional Reporting Requirements for 2019 CAHPS® Measures

Under the capitated financial alignment model, Medicare-Medicaid Plans (MMPs) are required to conduct/report the Consumer Assessment of Healthcare Providers and Systems (CAHPS) survey annually consistent with Medicare requirements (2019 CAHPS requirements are further outlined in HPMS memos dated August 16, 2018 and November 13, 2018). MMPs with 600 or more enrollees as of July 1, 2018 are required to contract with CMS-approved Medicare Advantage (MA) and Prescription Drug Plan (PDP) CAHPS survey vendors to conduct data collection for CY 2019.

Under the MA program, plans generally have an opportunity to add supplemental items to the MA & PDP CAHPS Survey instrument; these supplemental items are subject to CMS approval and are generally limited to a total of twelve (12) questions in order to ensure the highest possible response rate to the CAHPS survey. However, the ability to include plan-specific supplemental items is limited for MMPs under the capitated financial alignment model.

All MMPs are required to include ten (10) additional questions that have been identified by the independent evaluator, RTI, in order to assist with the evaluation. MMPs failing to collect and submit the ten (10) required evaluation supplemental items will be subject to compliance action.

MMPs participating in the Texas capitated financial alignment model demonstration will also be required to include eight (8) additional questions that have been identified by the state and which were shared previously with the MMPs. As a result of the RTI and state-specified questions, Texas MMPs will not be able to add any plan-specific measures. MMPs that have asked their vendor to add additional survey questions to the CAHPS survey should follow-up with their contracted CAHPS vendors regarding next steps (e.g., removing previously submitted plan-specific supplemental questions).

Please contact the MMCO at mmcocapsmodel@cms.hhs.gov if you have any questions about the contents of this memorandum.