DEPARTMENT OF HEALTH & HUMAN SERVICES Centers for Medicare & Medicaid Services 7500 Security Boulevard Baltimore, Maryland 21244-1850



CENTERS FOR MEDICARE & MEDICAID SERVICES

DATE: September 13, 2016

TO: New York FIDA-IDD Plan

FROM: Lindsay Barnette

Director, Models, Demonstrations and Analysis Group

Medicare-Medicaid Coordination Office

SUBJECT: Final New York FIDA-IDD State-Specific Reporting Requirements Appendix

The purpose of this memorandum is to announce the release of the state-specific reporting requirements appendix for the New York Fully Integrated Duals Advantage for Individuals with Intellectual and Developmental Disabilities (FIDA-IDD) Demonstration. The document is designed to provide guidance and technical specifications for the state-specific measures that the FIDA-IDD Plan will be required to collect and report under the demonstration. Also included with this memorandum is the FIDA-IDD State-Specific Value Sets Workbook, which contains all codes needed to report certain measures.

These state-specific measures supplement the Medicare-Medicaid Capitated Financial Alignment Model: Core Reporting Requirements document, which is available on the CMS website at: https://www.cms.gov/Medicare-Medicaid-Coordination/Medicare-and-Medicaid-Coordination/Medicare-Medicaid-Coordination-Office/FinancialAlignmentInitiative/InformationandGuidanceforPlans.html.

The specifications for the state-specific measures include their reporting frequency and due dates. Given the delays in releasing the final FIDA-IDD-specific reporting requirements appendix, we are modifying the frequency and due dates for measures IDD1.1, IDD1.2, and IDD3.1. These measures are specified to require simultaneous reporting of implementation and ongoing periods; however, we will not require implementation period monthly reporting at this time. The FIDA-IDD Plan is still obligated to report all applicable ongoing period quarters. The Quarter 2 submission for these three measures is deferred to October 31, 2016. The due date for Quarter 3 and beyond will follow the timeframe articulated in the specifications.

As outlined in the MOU and three-way contract, the FIDA-IDD Plan will also be required to meet established thresholds on certain quality withhold measures in order to earn back a withheld percentage of the capitation rate. Specifications for the state-specific quality withhold measures

are included in the FIDA-IDD-specific reporting requirements appendix, and additional details about the applicable benchmarks will be provided in subsequent guidance.

Please contact the Medicare-Medicaid Coordination Office at mmcocapsreporting@cms.hhs.gov with any questions.