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



MEDICARE-MEDICAID COORDINATION OFFICE

DATE: September 5, 2025

TO: District of Columbia Applicable Integrated Plan (AIP) D-SNPs

FROM: Kerry Branick

Deputy Director, Medicare-Medicaid Coordination Office

SUBJECT: District of Columbia AIP D-SNPs: Updates to CY 2026 Member Handbook

CMS and the District of Columbia are issuing an update to Chapter 4 of the CY 2026 Member Handbook for use by applicable integrated plan (AIP) dual eligible special needs plans (D-SNPs) operating in the District of Columbia. MMCO will not issue a revised CY 2026 Member Handbook model for changes included in this memorandum. We instruct AIP D-SNPs in the District of Columbia to update their CY 2026 Member Handbook based on the information provided in this memorandum.

These updates include:

Member Handbook

- Chapter 4 update Section C, bottom of page 4 prior to the language regarding Special Supplemental Benefits for the Chronically Ill insert the following bullets.
 - [Insert if not covering Medicaid benefits during a deemed continued eligibility period: If you are within our plan's [Enter plan deeming period. Plans can choose any length of time from one to six months for deemed continued eligibility, as long as the plan applies the criteria consistently across all members and fully informs members of the policy]-month period of deemed continued eligibility, we'll continue to provide all Medicare Advantage plan-covered Medicare benefits. However, your DC Medicaid coverage may end sooner than your Medicare coverage with us. When your DC Medicaid coverage ends, we will not pay for your DC Medicaid benefits including the Medicare cost sharing. Medicare cost-sharing amounts for Medicare basic and supplemental benefits do not change during this period.

We will assist you to regain your Medicaid eligibility. If your Medicaid eligibility is restored while you are still enrolled with us for your Medicare coverage, we will resume paying for your Medicaid benefits and your enrollment with us will

- continue. If you regain Medicaid eligibility after we disenroll you from our Medicare coverage you will need to contact us to reenroll in the plan.]
- [Insert if covering Medicaid benefits during deemed continued eligibility period: If you are within our plan's [Enter plan deeming period. Plans can choose any length of time from one to six months for deeming continued eligibility, as long as the plan applies the criteria consistently across all members and fully informs members of the policy]-month period of deemed continued eligibility, we will continue to provide all Medicare Advantage and DC Medicaid plan-covered benefits. During this time, we will assist you to regain Medicaid eligibility. If you regain Medicaid eligibility after we disenroll you from our Medicare coverage you will need to contact us to reenroll in the plan.]

Hard copy Member Handbooks must include this information before they are mailed to enrollees whenever possible. If updates to the hard copy Member Handbook are not practicable – for example, if they have already been printed – the model errata may be used to communicate the updated and accurate information until current stock of outdated materials is depleted.

This memorandum will also be posted to the Medicare-Medicaid Coordination Office's "D-SNPs: Integration & Unified Appeals & Grievance Requirements" webpage at https://www.cms.gov/medicaid-chip/medicare-coordination/qualified-beneficiary-program/d-snps-integration-unified-appeals-grievance-requirements grouped alphabetically by state under the "Model Materials" heading.

If you have any questions about the contents of this memorandum, please contact the Medicare-Medicaid Coordination Office at MMCO DSNPOperations@cms.hhs.gov.