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



MEDICARE-MEDICAID COORDINATION OFFICE

DATE: October 5, 2017

TO: New York-FIDA-IDD Medicare-Medicaid Plan

FROM: Lindsay P. Barnette

Director, Models, Demonstrations, and Analysis Group

SUBJECT: New York-FIDA-IDD MMP: Contract Year 2017 Quality Improvement Project

Information

The purpose of this memorandum is to provide information associated with the procedural changes for the contract year (CY) 2017 Quality Improvement Project (QIP) Annual Update that the Medicare-Medicaid Plan (MMP) operating in the New York-FIDA-IDD capitated financial alignment model demonstration is required to submit.

QIP Annual Update #1 (2017 – 2019 cycle):

- 1. Based on state-specific feedback, the MMP in New York-FIDA-IDD will not be required to use the QIP module in the HPMS system for submitting the Annual Update #1 submission for the current QIP 3-year cycle. While the MMP in New York-FIDA-IDD is still required to conduct the QIP, they will no longer be required to submit information directly to CMS via the QIP module in the HPMS system for a joint review by CMS reviewers and state reviewers in January 2018.
- 2. As a result, the MMP in New York-FIDA-IDD will be required to submit the Annual Update #1 directly to the state for a state-only review. The state will determine the method and format for that submission and will issue guidance to the plan. Please note that the MMP in New York-FIDA-IDD is still subject to QIP requirements, even if the plan is not directly reporting them to CMS via the QIP module in the HPMS system.
- 3. In addition, the MMP in New York-FIDA-IDD will be required to send the Contract Management Team (CMT) a courtesy copy of the final approved Annual Update #1 submission following the state's review, for CMS records.

If you have any questions, please contact the Medicare-Medicaid Coordination Office at mmcocapsmodel@cms.hhs.gov.