

DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
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MEDICARE-MEDICAID COORDINATION OFFICE

DATE: October 5, 2017

TO: Virginia Medicare-Medicaid Plans

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

SUBJECT: Virginia MMPs: 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 Updates that the Medicare-Medicaid Plans (MMPs) operating in the Virginia capitated financial alignment model demonstration are required to submit.

QIP Annual Update #3 (2016 – 2018 cycle):

1. Based on state-specific feedback, the MMPs in Virginia will be required to use the QIP module in HPMS for submitting the Annual Update #3 submissions for the current QIP 3-year cycle. As MMPs have done in the past, they will 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 MMPs in Virginia will be required to follow the same process and format for the QIP Annual Update #3 submissions via the QIP module in the HPMS system as previous years and according to the QIP MMP User Guide documentation. The Annual Update #3 submissions will take place during the open window in January 2018 (Monday - January 8, 2018 through Friday - January 12, 2018).

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