

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

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**DATE:** December 12, 2017

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

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Medicare-Medicaid Coordination Office

**SUBJECT:** New York-FIDA-IDD MMP: Additional Reporting Requirements for 2018 CAHPS<sup>®</sup> 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 (2018 CAHPS requirements are further outlined in HPMS memos dated August 14, 2017 and November 15, 2017). MMPs with 600 or more enrollees as of July 1, 2017 are required to contract with CMS-approved Medicare Advantage (MA) and Prescription Drug Plan (PDP) CAHPS survey vendors to conduct data collection for CY 2018.

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.

The MMP participating in the New York-FIDA-IDD capitated financial alignment model demonstration will be able to include up to four (4) additional questions beyond those that CMS and RTI are requiring, if so interested. If interested, the MMP should work with their contracted CAHPS vendor regarding next steps (e.g., to narrow down the list of previously submitted plan-specific supplemental questions).

Please contact the MMCO at [mmcocapsmodel@cms.hhs.gov](mailto:mmcocapsmodel@cms.hhs.gov) if you have any questions about the contents of this memorandum.