DATE: June 17, 2022

TO: Medicare-Medicaid Plans

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

SUBJECT: Massachusetts MMPs: Release of Final Contract Year 2023 Model Materials

Accompanying this memorandum are the new model materials for Contract Year (CY) 2023 developed jointly by CMS and Massachusetts for Medicare-Medicaid Plans (MMPs) operating in the Massachusetts Capitated Financial Alignment Model Demonstration. There were minimal updates to Massachusetts MMPs may only use the CY 2023 models for CY 2023.

We are issuing the following model materials to support compliance with provisions in the three-way contracts, as further described in the Marketing Guidance for Massachusetts Medicare-Medicaid Plans:

- **Annual Notice of Changes (ANOC):** The ANOC must be received by current enrollees by September 30, 2022 and posted on plan websites by October 15, 2022.

- **Member Handbook/Evidence of Coverage (EOC) - Chapters 1-12:** The Member Handbook (or a separate notice to alert enrollees how to access or receive the Member Handbook) must be received by current enrollees by October 15, 2022 and posted on plan websites by October 15, 2022.

- **Summary of Benefits (SB):** The SB must be available by October 15, 2022, but can be released as early as October 1, 2022, and posted on plan websites by October 15, 2022.

- **Provider and Pharmacy Directory:** The directory (or a separate notice to alert enrollees how to access or receive the directory) must be received by current enrollees no later than October 15, 2022. The directory must be available to current and prospective enrollees and posted on plan websites by October 15, 2022.

- **List of Covered Drugs (Formulary):** The formulary (or a separate notice to alert enrollees how to access or receive the formulary) must be received by current enrollees no later than October 15, 2022 and available to current and prospective enrollees and
posted on plan websites by October 15, 2022.

- **Member ID Card**
- **Integrated Denial Notice**
- **Notices of Adverse Action**
  - Denial of Level 1 Appeal (for MassHealth service)
  - Denial of Level 1 Appeal (for Medicare and MassHealth service)
- **Plan-Delegated Enrollment Notices**
  - Exhibit 5a: Welcome Letter for Passively Enrolled Individuals
  - Exhibit 5b: Welcome Letter for Individuals Who Opt In

The attached guidance and models will also be posted to the Medicare-Medicaid Coordination Office’s Information and Guidance for Plans webpage at [www.cms.gov/Medicare-Medicaid-Coordination/Medicare-and-Medicaid-Coordination/Medicare-Medicaid-Coordination-Office/FinancialAlignmentInitiative/MMPIinformationandGuidance/MMPMarketingInformationandResources](http://www.cms.gov/Medicare-Medicaid-Coordination/Medicare-and-Medicaid-Coordination/Medicare-Medicaid-Coordination-Office/FinancialAlignmentInitiative/MMPIinformationandGuidance/MMPMarketingInformationandResources), grouped alphabetically by state under the “State-Specific Information” heading.

We encourage all plans to work closely with their marketing reviewers and Contract Management Team to ensure timely submission and approval of all required CY 2023 materials, as well as timely and complete entry of Actual Mail Dates for ANOCs. If you have any questions about the contents of this memorandum, please contact the Medicare-Medicaid Coordination Office at MMCOCapsModel@cms.hhs.gov.