



MEDICARE-MEDICAID COORDINATION OFFICE

DATE: March 10, 2021
TO: Medicare-Medicaid Plans in Texas
FROM: Lindsay P. Barnette
Director, Models, Demonstrations and Analysis Group
SUBJECT: Revised Texas-Specific Reporting Requirements and Value Sets Workbook

The purpose of this memorandum is to announce the release of the revised Medicare-Medicaid Capitated Financial Alignment Model Reporting Requirements: Texas-Specific Reporting Requirements and corresponding Texas-Specific Value Sets Workbook. These documents provide updated technical specifications and applicable codes for the state-specific measures that Texas Medicare-Medicaid Plans (MMPs) are required to collect and report under the demonstration in accordance with Sections 2.14.2.3 and 2.17.2 of the Three-Way Contract. As with prior annual update cycles, CMS and the state revised these documents in an effort to streamline and clarify reporting for Texas MMPs.

Please see below for a summary of the substantive changes to the Texas-Specific Reporting Requirements as compared to the version previously released on February 28, 2020. Note that the Texas-Specific Value Sets Workbook also includes changes; Texas MMPs should carefully review and incorporate the updated value sets, particularly for measures TX1.3, TX4.13, and TX4.14.

Texas MMPs must use the updated specifications and value sets for measures due on or after June 1, 2021. Texas MMPs must also use the updated specifications and value sets when reporting measure TX1.3 on April 30, 2021, and must reference the latest Prevention Quality Indicators (PQI) technical specifications when reporting measure TX4.17 on April 30, 2021. Should you have any questions, please contact the Medicare-Medicaid Coordination Office at mmcocapsreporting@cms.hhs.gov.

SUMMARY OF CHANGES

Measure TX1.2

- In the Notes section, added an instruction that data element A should only include members who are currently enrolled as of the last day of the reporting period, including deceased members who were enrolled through the end of the reporting period.

Measure TX1.3

- In the Notes section, updated the list of value sets for identifying data element B to include a new Telephone Visits value set.

Measure TX1.4

- In the Notes section, added an instruction that data element A should include deceased members who were enrolled through the end of the reporting period.

Measure TX4.13

- Revised the guidance in the Notes section to align with updated specifications from the measure steward (NCQA/HEDIS).

Measure TX4.14

- Revised the guidance in the Notes section to align with updated specifications from the measure steward (NCQA/HEDIS).

Measure TX4.17

- In the Data Element Definitions section, revised the indicator name for “Community-acquired pneumonia” in data element B to align with updated specifications from the measure steward (AHRQ/PQI).
- In the Notes section, revised the reference to the indicator name as noted above.