



MEDICARE-MEDICAID COORDINATION OFFICE

DATE: February 28, 2020
TO: Medicare-Medicaid Plans in California
FROM: Lindsay P. Barnette
Director, Models, Demonstrations and Analysis Group
SUBJECT: Revised California-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: California-Specific Reporting Requirements and corresponding California-Specific Value Sets Workbook. These documents provide updated guidance, technical specifications, and applicable codes for the state-specific measures that California Medicare-Medicaid Plans (MMPs) are required to collect and report under the demonstration. As with prior annual update cycles, revisions were made in an effort to streamline and clarify reporting expectations for California MMPs.

Please see below for a summary of the substantive changes to the California-Specific Reporting Requirements. Note that the California-Specific Value Sets Workbook also includes changes; California MMPs should carefully review and incorporate the updated value sets, particularly for measures CA1.11, CA4.1, and CA4.3.

California MMPs must use the updated specifications and value sets for measures due on or after June 1, 2020. Should you have any questions, please contact the Medicare-Medicaid Coordination Office at mmcocapsreporting@cms.hhs.gov.

SUMMARY OF CHANGES

Measure CA1.11

- In the Notes section, revised the hospice exclusion for data element A to reflect that the Hospice value set was replaced with two value sets (Hospice Encounter and Hospice Intervention) and to clarify that supplemental data may be used as well.

Measure CA2.1

- In the Analysis section, added information about additional calculations that will be used to evaluate reported data.