DEPARTMENT OF HEALTH & HUMAN SERVICES Centers for Medicare & Medicaid Services 7500 Security Boulevard Baltimore, Maryland 21244-1850



MEDICARE-MEDICAID COORDINATION OFFICE

DATE: February 28, 2023

TO: Medicare-Medicaid Plans in Ohio

FROM: Lindsay P. Barnette

Director, Models, Demonstrations and Analysis Group

SUBJECT: Revised Ohio-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: Ohio-Specific Reporting Requirements and corresponding Ohio-Specific Value Sets Workbook. These documents provide updated technical specifications and applicable codes for the state-specific measures that Ohio 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 Ohio MMPs.

Please see below for a summary of the substantive changes to the Ohio-Specific Reporting Requirements as compared to the prior version dated February 28, 2022. Note that the Ohio-Specific Value Sets Workbook also includes changes; Ohio MMPs should carefully review and incorporate the updated value sets, particularly for measure OH1.3.

Ohio MMPs must use the updated specifications and value sets for measures due on or after May 31, 2023. Should you have any questions, please contact the Medicare-Medicaid Coordination Office at mmcocapsreporting@cms.hhs.gov.

SUMMARY OF CHANGES

Introduction

• In the Reporting on Disenrolled and Retro-disenrolled Members section, clarified that MMPs should report on all enrolled members who meet the definition of the data elements at the time of reporting deadline.