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 South Carolina

FROM: Lindsay P. Barnette

Director, Models, Demonstrations and Analysis Group

SUBJECT: Revised South Carolina-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: South Carolina-Specific Reporting Requirements and corresponding South Carolina-Specific Value Sets Workbook. These documents provide updated guidance, technical specifications, and applicable codes for the state-specific measures that South Carolina Medicare-Medicaid Plans (MMPs) are required to collect and report under the demonstration. As with prior annual update cycles, CMS and the state revised these documents in an effort to streamline and clarify reporting expectations for South Carolina MMPs

Please see below for a summary of the substantive changes to the South Carolina-Specific Reporting Requirements as compared to the version previously released on February 28, 2022. Note that the South Carolina-Specific Value Sets Workbook also includes changes; South Carolina MMPs should carefully review and incorporate the updated value sets, particularly for measure SC2.4.

South Carolina 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 Variations from the Core Reporting Requirements Document section, updated the South Carolina-specific guidance regarding reporting Core Measure 9.2. Specifically, the link for the Division of Community Long Term Care Community Choice Policy and Procedure Manual was revised.

•	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.