DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
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MEDICARE-MEDICAID COORDINATION OFFICE

DATE: March 10, 2021

TO: Medicare-Medicaid Plans in Ohio

FROM: Lindsay P. Barnette
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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 in accordance with Sections 2.11.3.3 and 2.14.2 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 Ohio MMPs.

Please see below for a summary of the substantive changes to the Ohio-Specific Reporting Requirements as compared to the version previously released on February 28, 2020. 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 June 1, 2021. Ohio MMPs must also use the updated specifications and value sets when reporting measure OH1.3 on April 30, 2021. Should you have any questions, please contact the Medicare-Medicaid Coordination Office at mmcocapsreporting@cms.hhs.gov.

SUMMARY OF CHANGES

Introduction
- Updated the "Variations from the Core Reporting Requirements Document" section for Core Measure 5.3 to reflect the revised file naming convention for the measure.

Measure OH1.3
- In the Notes section, updated the list of value sets for identifying data element B to include a new Telephone Visits value set.