

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

DATE: February 07, 2024

TO: All Medicare-Medicaid Plans

FROM: Lindsay P. Barnette
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Medicare-Medicaid Coordination Office

SUBJECT: Updated 2024 Medicare-Medicaid Plan Network Adequacy Criteria and Guidance

The Centers for Medicare & Medicaid Services (CMS) is releasing the updated Medicare-Medicaid Plan (MMP) annual network submission guidance to include regulatory changes that became effective January 1, 2024.

The Contract Year 2024 Medicare Advantage (MA) and Part D Final Rule ([CMS-4201-F](#)) (final rule) added network adequacy requirements at § 422.116(b)(1) for two new behavioral health provider specialty types, Clinical Psychology and Clinical Social Work, which are also eligible for the 10-percentage point credit towards time and distance standards when the plan provides additional telehealth benefits from these specialty types (422.116(d)(5)).

MMPs will be required to include these new provider specialty types in their network submissions for formal network adequacy review beginning in calendar year 2024. If indicated, the telehealth credit will be automatically applied in the Health Plan Management System (HPMS).

The updated guidance can be found at: <https://www.cms.gov/Medicare-Medicaid-Coordination/Medicare-and-Medicaid-Coordination/Medicare-Medicaid-Coordination-Office/FinancialAlignmentInitiative/MMPInformationandGuidance/MMPApplicationandAnnualRequirements>

If you have any questions about the contents of this memorandum, please contact the Medicare-Medicaid Coordination Office at MMCOCapsReporting@cms.hhs.gov. Please reference 2024 Network Adequacy in the subject header.