

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



MEDICARE-MEDICAID COORDINATION OFFICE

DATE: August 29, 2024

TO: Applicable Integrated Plan (AIP) Dual-Eligible Special Needs Plans (D-SNPs) in States Using Integrated D-SNP models

FROM: Lindsay P. Barnette
Director, Models, Demonstrations & Analysis Group

SUBJECT: Revisions to Contract Year 2025 Evidence of Coverage (Member Handbook) for AIP D-SNPs

The purpose of this memorandum is to provide updates to the Contract Year (CY) 2025 Member Handbook for AIP D-SNPs in states using an integrated Evidence of Coverage (Member Handbook) model. This includes AIP D-SNPs in California, the District of Columbia, Minnesota, New Jersey, and Tennessee. These changes are based on updates to the CY 2025 Medicare Advantage models that were released as described in the Health Plan Management System (HPMS) memorandum, “Model Notice Corrections” on August 22, 2024.

MMCO will not issue revised CY 2025 state-specific model materials for changes included in this memorandum. We instruct AIP D-SNPs in the applicable states to update their CY 2025 model materials based on the information provided in this memorandum. The information below includes updates to the Evidence of Coverage (Member Handbook) Chapters 4 and 9.

Hard copy Member Handbooks must include this information before they are mailed to enrollees by October 15th whenever possible. If updates to the hard copy Member Handbook are not practicable – for example, if they have already been printed – the model errata may be used to communicate the updated and accurate information until current stock of outdated Member Handbook documents is depleted.

We will post this memorandum to MMCO’s D-SNPs: Integration & Unified Appeals & Grievance Requirements webpage at <https://www.cms.gov/medicaid-chip/medicare-coordination/qualified-beneficiary-program/d-snps-integration-unified-appeals-grievance-requirements>.

If you have any questions about the contents of this memorandum, please contact the Medicare-Medicaid Coordination Office at MMCO_DSNPOperations@cms.hhs.gov.

CY 2025 Model Updates

EOC

Chapter 4

- Section D, for Physician/provider services including doctor's office visits, delete the following bullet:

telehealth services provided by qualified occupational therapists (OTs), physical therapists (PTs), speech-language pathologists (SLPs), and audiologists

Chapter 9

- Section F3, update the third bullet as follows:

We can accept an appeal request without the form, but we can't begin or complete our review until we get it. If we don't get the form before our deadline for making a decision on your appeal: