



**MEDICARE-MEDICAID COORDINATION OFFICE**

---

**DATE:** December 02, 2016

**TO:** Ohio Medicare-Medicaid Plans Required to Resubmit their Model of Care for CY 2018

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

**SUBJECT:** Ohio MMPs: CY 2018 Model of Care Requirements

This memorandum provides Ohio Medicare-Medicaid Plans (MMPs) required to resubmit their model of care (MOC) following their initial three-year approval by the National Committee for Quality Assurance (NCQA) with guidance on the substantive requirements of that resubmission. Given that the currently approved MOC expires on December 31, 2017, your organization must submit an updated MOC for CY 2018 and beyond by February 15, 2017. Additional information about the submission process will be provided to all resubmitting Medicare Advantage Special Needs Plans (SNPs) and MMPs later this year.

CMS' MOC requirements, Elements 1 through 4, are in the attached CY 2018 MOC matrix upload document. As with the initial MOC submitted with your organization's MMP application, NCQA will review the standard CMS required elements.

In addition, Ohio MMPs should ensure that their entire MOC submission is aligned with the care model, assessment, and Individualized Care Plan provisions in section 2.5 of the three-way contracts. Changes to section 2.5 of the three-way contracts are being jointly reviewed by CMS and the Ohio Department of Medicaid. Further guidance will be provided at a later time about any necessary updates to the MOCs should there be a significant three-way contract change.

Ohio MMPs receiving this memorandum must submit their MOCs and completed versions of the attached matrix upload documents via HPMS no later than **February 15, 2017**. MMPs' receipt of NCQA's comments and scoring will be available in HPMS in April 2017. Changes to the initial submissions will only be permitted consistent with CMS' policy for SNP MOC resubmissions and scoring.

Any questions regarding the contents of this memorandum should be directed to your contract management team or to the Medicare-Medicaid Coordination Office at [mmcocapsmodel@cms.hhs.gov](mailto:mmcocapsmodel@cms.hhs.gov)