



**MEDICARE-MEDICAID COORDINATION OFFICE**

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**DATE:** February 28, 2018

**TO:** New York Medicare-Medicaid Plans (FIDA Plans)

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

**SUBJECT:** Revised New York FIDA-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: New York FIDA-Specific Reporting Requirements and corresponding New York FIDA-Specific Value Sets Workbook. These documents provide updated guidance, technical specifications, and applicable codes for the state-specific measures that FIDA Plans are required to collect and report under the demonstration. Many of the updates were made in an effort to clarify and simplify reporting expectations for FIDA Plans, consistent with the Administration's commitment to reduce administrative burden and increase efficiency.

Please see below for a summary of the substantive changes to the New York FIDA-Specific Reporting Requirements. Note that the New York FIDA-Specific Value Sets Workbook also includes changes; FIDA Plans should carefully review and incorporate the updated value sets, particularly for measure NY2.3.

FIDA Plans must use the updated specifications and value sets for measures due on or after May 31, 2018. Should you have any questions, please contact the Medicare-Medicaid Coordination Office at [mmcocapsreporting@cms.hhs.gov](mailto:mmcocapsreporting@cms.hhs.gov).

**SUMMARY OF CHANGES**

**Measures NY1.1 and NY1.2**

- These measures, which were previously designated as “suspended,” were updated to “retired” since CMS and the state do not intend to reinstate them.

**Measure NY2.1**

- Given that all Medicare-Medicaid Plans will report timely care plan completion under the new Core Measure 3.2, this state-specific measure is retired effective as of Quarter 1 2018. Note that supplementary reporting instructions in the applicable introductory sections were also updated to reflect the removal of this measure.

**Measure NY2.2**

- In the Notes section, clarified that this measure should only include care plans that were developed/revised with participation from the member.

**Measure NY2.3**

- Updated the reporting frequency to annual and the reporting period to calendar year.
- Clarified the data elements, Analysis section, and Notes section to reflect that acute inpatient discharges should be included in this measure.
- Revised the Notes section to provide guidance for excluding nonacute inpatient stays and for using UB Type of Bill codes to further identify inpatient hospital discharges.
- Also in the Notes section, revised the exclusion criteria to differentiate discharges followed by direct transfers/readmissions to acute and nonacute facilities.