

MEMORANDUM

To: CCO Applicants and Stakeholders

From: Susan Otter, Project Director, CMS Design Contract for Integrating Medicare/Medicaid for Individuals Dually Eligible (susan.otter@state.or.us)

Date: March 20, 2012

Regarding: Requirements for CCOs for Medicare/Medicaid Alignment Demonstration

As many of you know, OHA has received questions about whether CCOs would be required to participate in the Medicare/Medicaid Alignment Demonstration and obtain a three-way contract for serving dually eligible individuals.

I am writing to provide some resolution on this issue. **CCOs will not be required to participate in the Medicare/Medicaid Demonstration Project and obtain a three-way contract for serving dually eligible individuals.** This decision comes after several helpful comments that underscored concerns and uncertainties around the terms and timing of the demonstration project of the project in relation to the CCO certification and contracting process.

To be responsive to those comments, **participation in the Medicare/Medicaid Alignment Demonstration will be voluntary for CCOs.** This decision is reflected in the RFA (see Appendix D) and temporary procurement rules (OAR 410-141-3010 (14)) posted today, and will be reflected in OHA's final proposal to CMS for the Medicare/Medicaid Alignment Demonstration.

Next steps for OHA: Meanwhile, OHA continues to pursue the Medicare/Medicaid Alignment Demonstration and hopes to secure terms that will be beneficial to individuals who are dually eligible and will also be a fit for CCOs. The demonstration offers opportunities to align and integrate Medicare and Medicaid benefits and financing that could result in better health and quality of care for individuals who are dually eligible.

Notice of Intent to Apply: Because CCOs will not be required to participate in the demonstration, submitting a Notice of Intent to Apply (NOIA) to CMS is not required for CCO certification. However, as **NOIAs are non-binding and applicants who submit NOIAs will have the opportunity to apply for the demonstration if they choose when more details are known, we do advise that interested CCO applicants do submit the Notice.** The deadline for submission to CMS is April 2, 2012.

More information: See reference documents at the end of this email to review and comment on Oregon's draft demonstration proposal, and for instructions on submitting a NOIA. The RFA (<http://cco.health.oregon.gov>) includes further information about requirements for participation in the Medicare/Medicaid Alignment Demonstration, under Appendix D. CCO applicants interested in pursuing the Medicare/Medicaid Alignment Demonstration can also expect further guidance in the form of an RFA addendum and formal guidance forthcoming from CMS.

Reference documents:

Oregon's proposal to CMS for the Medicare/Medicaid Alignment Demonstration is currently open for a 30-day public comment period (March 5 – April 4, 2012), and can be viewed online at: <http://cco.health.oregon.gov/DraftDocuments/Pages/Duals-Proposal.aspx> . Plans are encouraged to review the proposal and submit comments via the website.

CMS Notice of Intent to Apply

In addition to submitting the CCO Letter of Intent to Apply to OHA, applicants intending to participate in the Medicare/Medicaid Demonstration must submit a Notice of Intent to Apply to the Centers for Medicare and Medicaid Services (CMS). This notice must be submitted to CMS no later than April 2, 2012 using the [NOIA web tool](#). Applicants that do not submit NOIAs to CMS by this date will not be able to participate in this demonstration.

Recent [CMS guidance](#) contains more information and instructions for submitting the NOIA and CMS User ID connectivity form (see pages 12-14, 27-30).

CMS User ID connectivity form

After submitting the NOIA, applicants will receive a confirmation email from CMS containing their new contract ID and instructions for submitting a CMS User ID connectivity form if they are not current Medicare contractors. The connectivity form must be mailed to CMS no later than April 9, 2012 to ensure user access to the CMS Health Plan Management System (HPMS). This system is used for submitting information to CMS related to Medicare requirements for participating in the demonstration.

See recent [CMS guidance](#) for more information and instructions.