



CENTERS FOR MEDICARE & MEDICAID SERVICES

DATE: August 18, 2017

TO: Medicare-Medicaid Plans

FROM: Lindsay P. Barnette
Director, Models, Demonstrations and Analysis Group
Medicare-Medicaid Coordination Office

SUBJECT: Request for Comments on the 2019 Capitated Financial Alignment Initial and Service Area Expansion Application

Included with this memorandum is a draft of the 2019 Capitated Financial Alignment Model Demonstration Initial and Service Area Expansion Application. The document provides the draft requirements organizations must meet to be qualified by the Centers for Medicare & Medicaid Services (CMS) in two areas:

- 1) An interested organization seeking to become a Medicare-Medicaid Plan (MMP) in the Texas Dual Eligible Integrated Care Demonstration Project.
- 2) An existing MMP seeking to offer its MMP product in additional counties within the MMP's current demonstration.

Updates and changes to the 2019 Capitated Financial Alignment Model Demonstration Initial and Service Area Expansion Application, include, but are not limited to:

- Updating overall dates
- Combining the Initial and Service Area Expansion criteria into one document
- Clarifying that medical networks will be assessed for pending counties for service area expansion applicants. Initial applicants will submit networks through the readiness review process and not this application.
- Removing the submission of medical provider and facility contract templates and associated crosswalks

While CMS is currently seeking comment on the draft 2019 Capitated Financial Alignment Demonstration Initial and Service Area Expansion, initial applications are contingent upon the

upcoming Texas Health and Human Services Commission procurement for the STAR+PLUS Medicaid managed care program. Interested organizations can refer to <https://hhs.texas.gov/doing-business-hhs/business-contracting-opportunities>.

Existing MMPs should consult with their respective states for more information related to opportunities related to service area expansions for 2019, including guidance on the state plan selection process, as applicable.

Please provide comments, using the attached template, to the Medicare-Medicaid Coordination Office at MMCOCapsModel@cms.hhs.gov by September 11, 2017. We will revise the draft document following the comment period announced in this memorandum.