

**2017 High Level Summary of Change or Crosswalk of Changes for  
PRA Package CMS 10237: Part C - MA and 1876 Cost Plan Expansion Application**

Revision/Clarification	Purpose of the Revision/Clarification	2017 Part C Application	Application Section	Category of Comment	Level of Applicant Burden <i>I = Increases burden D – Decreases burden N – No Change</i>
<b>TECHNICAL</b>					
1. Edits to MA Part C & 1876 Cost Plan Expansion Application, HSD Instructions , MA Provider and Facility HSD Tables and Exception Request Template including the addition of missing words, clarifying language, capitalization, deletion of missing spaces, grammar and final dates.	To maintain a consistent format and provide accurate timeframes and instructions.	MA Part C & 1876 Cost Plan Expansion Application, HSD Instructions, MA Provider and Facility HSD Tables, and Exception Request Template	All Sections	N/A	N
<b>SUBSTANTIVE CHANGES</b>					
1. Service Area Expansion (SAE) applications will require HSD Tables for the entire MAO network not just the counties the plan is proposing to expand into with the SAE request.	Provides support and focus to CMS commitment to monitoring network adequacy for MA.	2.7 Type of Applications	SAE Applications are for:	60 Day	I

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2. Revised attestation #1 to Section 3.2 of the application. A contract of the applicant has been non-renewed or termination within the past 2 years. If the Applicant attests “yes” the organization must submit the Two Year Prohibition Waiver Request upload document for CMS review.	This attestation was revised to provide the applicant instructions on how to proceed with waiver request related to the Two Year Prohibition as set forth in 42 CFR 422.506(a)(4)(a). CMS will not enter into a contract with a Medicare Advantage Organization for 2 years unless there are special circumstances that warrant special consideration as determined by CMS.	Section 3 Attestations	3.2 Administrative Management	60-day	N
3. Added Two Year Prohibition Waiver Request Upload Document.	The Two Year Prohibition Waiver Request Upload Document is being provided to applicants to request consideration by CMS of the special circumstance related to non-renewal and/or termination of MAO contract within the past 2 years.	Section 4 Document Upload Templates	4.3 Two Year Prohibition Waiver Request Upload Document	60-day	I

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4. Revised language in section on Fiscal Soundness to clarify the information the applicant should upload via HPMS for CMS to review.	CMS clarified the information the applicant should submit for review of Fiscal Soundness of a MAO.	Section 3 Attestations	3.7 Fiscal Soundness	60-day	N
5. Deleted attestation # 7 in the Health Services Management & Delivery section. Applicant agrees that all “applicable “ contracted physicians /providers listed in the Provider Table have admitting privileges , as appropriate ,(other than courtesy privileges) at contracted facility.	The attestation was deleted because CMS does not have requirement related to “admitting privileges”. Reduce applicant confusion related to “applicable “contracted physicians/providers and admitting privileges.	Section 3 Attestations & Appendix IV- Medicare Cost Plan SAE	3.11 Health Services Management & Delivery and 8.5 Health Services Management & Delivery	60-day	D
6. Delete requirement for upload documents in the Quality Improvement Program attestation section. Applicant will no longer be required to upload the QI Program Matrix and Crosswalk for Part C QI Program.	The upload requirements were removed from Section 3.12 Quality Improvement Program and replaced with 18 attestation questions.	Section 3 Attestations	3.12 Quality Improvement Program	60-day	D

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7. Added question#5 to Minimum Enrollment Waiver Request Upload Document as follows: Please describe any factors, such as specific populations your organization intends to serve or geographic locations, which may result in low enrollment?	CMS is requesting clarification from the applicant related to the factors that may impact or result in low enrollment in the waiver request.	Section 4 Document Upload Templates	4.2 Minimum Enrollment Waiver Request Upload	60 –day	I
8. Deleted two requirements under the Partial County Justification Upload document related to the criteria of Necessary. The applicant will be required to describe the evidence to substantiate the criteria.	CMS has revised the partial county guidance to eliminate the use of the inability to establish economically viable contracts as a partial county justification.	Section 4 Document Upload Templates	4.10 Partial County Justification	60-day	D

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<b>HSD INSTRUCTIONS, TABLES AND EXCEPTION PROCESS</b>					
<p>1. Exception Request template will be revised to reflect the deletion of the reference to Pattern of Care as justification for an exception to be replaced with Other Factors in accordance with 42 CFR 422.112 a(10)(v) that CMS determines are relevant in setting a standard for an acceptable health care delivery network in a particular service area. In addition the Exception Request template will be revised and automated within HPMS.</p>	<p>The automation of the Exception Request template will improve the efficiency and reduce burden related to the submission and review of the Exception requests.</p>	<p>Exception Request Template and HSD Instructions</p>	<p>N/A</p>	<p>30-day</p>	<p>D</p>
<p>2. Added definitions for both the MA Provider and Facility Types.</p>	<p>To provide clarification to the applicants in the completion of the HSD Tables.</p>	<p>HSD Instructions</p>	<p>N/A</p>	<p>60-day</p>	<p>N</p>

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3. Deleted the requirement to collect the <b><i>Provider Previously Listed</i></b> from the MA Provider HSD Table and HSD Instructions. CMS uses automated reports for HSD table reviews.	CMS no longer reviews tables manually.	MA Provider HSD Table and HSD Instructions	N/A	60-day	D
4. Deleted the requirement to collect the <b><i>Employment Status</i></b> from the MA Provider HSD Table and HSD Instructions. This data is not used by CMS.	CMS no longer needs to collect the Employment Status.	MA Provider HSD Table and HSD Instructions	N/A	60-day	D
5. Service Area Expansion (SAE) applications will require HSD Tables for the entire MAO network not just the counties the plan is proposing to expand into with the SAE request.	Provides support and focus to CMS commitment to monitoring network adequacy for MA.	HSD Instructions	N/A	60-day	I

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<b>APPENDIX I: Solicitations for Special Needs Plan (SNP) Application</b>					
1. Reduced the number of attestations for the SNP Quality Improvement Program from 28 to 18.	CMS provided clarification regarding requirements for SNP Quality Improvement Program.	Appendix I-SNP Proposal	5.11 SNP Quality Improvement Program Requirements	60-day	D
2. Deleted the requirement for upload of both the Quality Improvement Program Plan and QIP Matrix upload documents.	CMS will no longer collect the QI plans and QIP Matrix.	Appendix I-SNP Proposal		60-day	D
3. Deleted requirement for submission of MOC Matrix Upload Document and the MOC Narrative for applicants submitting SAE application.	CMS will no longer require MOC for SNP applications requesting SAE.	Appendix I-SNP Proposal	5.4 SNP Service Area Expansion(SAE)	60-day	D