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| **2019 (Current version)** | **2020 (new version)** | **Type of Change** | **Reason for Change** | **Burden Change** |
| New SNP MOC Requirement | **New SNP MOC Requirement****MOC Element 2B Care Coordination: HRAT**Conduct a comprehensive initial health risk assessment of the individual's physical, psychosocial, and functional needs as well as annual health risk reassessment, using a comprehensive risk assessment tool that CMS may review during oversight activities, and ensure that results from the initial assessment and annual reassessment conducted for each individual enrolled in the plan are addressed in the individual's individualized care plan as required under 42 CFR section 422.101(f)(1)(ii).  | New | This represents new requirements legislated by the BBA of 2018 to section 1859(f) of the Social Security Act. | Budget Neutral This requirement is consistent with currently approved information trackingpractices & does not impose any new or revised burden beyond what is currently approved by OMB. |
| New SNP MOC Requirement | **New SNP MOC Requirement****MOC Element 2C Care Coordination: Face-to-Face Encounter**Provide, on at least an annual basis, beginning within the first 12 months of enrollment, as feasible and with the individual's consent, for face-to-face encounters for the delivery of health care or care management or care coordination services and be between each enrollee and a member of the enrollee's interdisciplinary team or the plan's case management and coordination staff, or contracted plan healthcare providers. A face-for-face encounter must be either in person or through a visual, real-time, interactive telehealth encounter. | New | This represents new requirements legislated by the BBA of 2018 to section 1859(f) of the Social Security Act. | Increased burden for SNPs. |
| New SNP MOC Requirement | **New SNP MOC Requirement****MOC Element 3A SNP Provider Network: Specialized Experience**In the management of care, use an interdisciplinary team that includes a team of providers with demonstrated expertise and training, and, as applicable, training in a defined role appropriate to their licensure in treating individuals similar to the targeted population of the plan. | New | This represents new requirements legislated by the BBA of 2018 to section 1859(f) of the Social Security Act. | Budget Neutral This requirement is consistent with currently approved information trackingpractices & does not impose any new or revised burden beyond what is currently approved by OMB. |
| **MOC Element 4B Quality Measurement and Performance Improvement: Measurable Goals & Health Outcomes for the MOC**Explain the specific steps the SNP will take if goals are not met in the expected time frame. | **New SNP MOC Requirement****MOC Element 4B Quality Measurement and Performance Improvement: Measurable Goals & Health Outcomes for the MOC**If the MOC did not fulfill the previous MOC’s goals, the plan must describe how it will achieve or revise the goals for the plan’s next MOC implementation.Note that we are eliminating the current requirement to “Explain the specific steps the SNP will take if goals are not met in the expected time frame” and replacing it with “If the MOC did not fulfill the previous MOC’s goals, the plan must describe how it will achieve or revise the goals for the plan’s next MOC implementation.”Both the existing and new requirement are somewhat similar in nature, however, the new requirement mandated by the BBA is more specific and requires SNPs to describe how it will achieve or revise the goals for the plans next MOC implementation. Therefore, we’re eliminating the existing MOC requirement identified in the left column. | Rev | This represents new requirements legislated by the BBA of 2018 to section 1859(f) of the Social Security Act. | Budget Neutral This requirement is consistent with currently approved information trackingpractices & does not impose any new or revised burden beyond what is currently approved by OMB. |