

CMHCB Demonstration Frequently Asked Questions

General information

Q. Is the CMHCB demonstration authorized by the Medicare Modernization Act?

A. The CMHCB demonstration is not associated with the Medicare Modernization Act (MMA). This demonstration is a CMS initiative.

Application process

Q. Does CMHCB require a letter of intent to be filed prior to the application deadline?

A. No, a letter of intent is not required.

Q. Is the application due date 90 days from when I receive the sample data file?

A. No, the due date is 90 days after the notice announcing the demonstration was published in the Federal Register. The application must be received by CMS by 5:00 PM Eastern Time on January 4, 2005.

Financial / payment arrangements

Q. May applicants propose both an administrative/care management fee and a gain-sharing arrangement or must they choose one or the other?

A. Applicants may propose an administrative/care management fee, a gain-sharing arrangement, or a combination of both. All payment proposals must guarantee a net savings of 5 percent. Net savings will be calculated by comparing fee-for-service (FFS) payments for the control group to FFS payments plus any administrative or care management fees for the intervention group. The administrative or care management fees will be held at risk for the amount of any realized net savings less than 5 percent.

Sample data set

Q. Are there zip code level data available for the sample data set?

A. The CMHCB demonstration sample data file includes only the state in which the beneficiary lives. Zip code data are not available.

Q. Are there hospital level data available for the sample data set?

A. The CMHCB demonstration sample data file provides summary claims data information for each beneficiary. Hospital level data are not available.

- Q. Does the population in the sample data set contain beneficiaries who died or disenrolled?**
- A. The sample file was developed as a cohort of fee-for-service beneficiaries continuously enrolled throughout calendar years 1999 and 2000. Beneficiaries who died in 1999 or 2000 are not included in the sample data set. The file does include and identify beneficiaries who died in 2001.**
- Q. Is it possible to obtain additional data from the national Medicare 5 Percent sample file?**
- A. The only data that are available through the CMHCB demonstration solicitation are contained in the sample data set.**

Eligible organizations and populations

- Q. Are acute care and integrated hospital systems allowed to participate?**
- A. Yes, acute care and integrated hospital systems are eligible to participate.**
- Q. Are Medicare beneficiaries residing in nursing homes or skilled nursing facilities eligible to participate in the demonstration?**
- A. Yes, nursing home and skilled nursing facility residents are eligible to participate.**
- Q. Are children an eligible population?**
- A. Yes, children who are high-cost and / or high-risk Medicare fee-for-service beneficiaries may be included in the CMHCB demonstration.**
- Q. Are there any specific diagnoses or co-morbidities the CMHCB demonstration is trying to target or exclude?**
- A. No, the CMHCB demonstration is not targeting or excluding specific diagnoses. The intent of the demonstration is to identify and provide care management services for fee-for-service Medicare beneficiaries with high-cost and / or high-risk conditions. Within the high-cost and /or high-risk population, applicants may propose their own diagnoses, demographic, and other demonstration parameters.**