

## Final Rule Provisions

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### Star Measure Scores

- Removed 13 and Kept Diabetes Eye Exam
- Added Depression Screening & Follow-up Measure into Stars 2029.

2

### Recension of Supplemental Benefit Mid-Year Notice

### Eliminated Delays and Waiting Periods for Marketing at an Educational Event

3

Enabled Scope of Appointment (SOA) Forms and Follow-Up to be Completed without Waiting Period

4

Requiring Public Display of Special Supplemental Benefits for the Chronically Ill (SSBCI) Eligibility Criteria

5

### Model of Care Off-Cycle Submissions for Updates and Corrections

- Between January 1<sup>st</sup> and March 31<sup>st</sup>, and
- Between October 1<sup>st</sup> and December 31<sup>st</sup> of each calendar year.

# Special Needs ——— Plan Alliance

## 2027 Non-Finalized Proposals

- 1) Request for Information (RFI): C-SNP and I-SNP Growth and Dually Eligible Individuals
- 2) Request for Information (RFI) on Future Directions in Medicare Advantage (Risk Adjustment, Quality Bonus Payments, and Well-Being and Nutrition)
- 3) CMS requested comments on well-being and nutrition policy changes for the MA program to ensure MA organizations bear long-term risk for beneficiary health and well-being.

## SNP Alliance Response

- 1) CMS did not provide responses to the comments made by the SNP Alliance or any other organization commenting on the RFI: C-SNP and I-SNP Growth and Dually Eligible Individuals.
- 2) CMS took no regulatory action on potential future model changes (e.g., the possible incorporation of MA encounter data, AI-based modeling approaches, and the exclusion of diagnoses not associated with specific services rendered) in the RFI: Future Directions in Medicare Advantage.
- 3) CMS did not respond to comments made by the SNP Alliance or any other organization commenting on the Well-Being and Nutrition Policy portion of the RFI: Future Directions in Medicare Advantage.

# Special Needs Plan Alliance

Final Summary Rule	SNP Alliance Comments	SNP Alliance Impact on Rule	SNP Alliance Action Steps	Implementation Timeline/Deadline
All SNP Types				
Title	Support/Do Not Support.	Comment	Action and Lead Work Group: MMI	Finalized with/without modifications effective.
<p><b>Model of Care</b> CMS finalized that for CY 2027 and subsequent years, D-SNPs and I-SNPs seeking to revise their NCQA-approved MOC during the MOC approval period must submit updates and corrections between January 1<sup>st</sup> and March 31<sup>st</sup>, and October 1<sup>st</sup> and December 31<sup>st</sup> of each calendar year.</p>	<p>We commented that the HPMS off-cycle submission portal timeframe is too limited.</p> <p>Do Not Support Only 6 Months Open.</p>	<p>SNP Alliance has long held that the HPMS off-cycle submission window should be year-round.</p>	<p>Performance Evaluation Leadership Group</p>	<p>Finalized without modifications, effective CY27. Discussed the bandwidth/capacity of NCQA as a primary reason for not being able to keep the HPMS portal year-round.</p>
<p><b>Marketing: 12-Hour Delay</b> CMS finalized its proposal to eliminate the 12-hour delay requirement, so that a marketing event may take place directly following and in the same location as an educational event, as long as plans and agents/brokers notify the beneficiary that the educational event is ending and a marketing event will begin shortly and also give the beneficiary a sufficient opportunity to leave the educational event prior to the start of the</p>	<p>Support</p>	<p>The SNP Alliance expressed concern about removing the rules and waiting periods. But, with the beneficiary at the center, removing the current policies could allow beneficiaries, with limited transportation and who may not be able to make the second event or appointment, to select plan coverage at an in-</p>	<p>None</p>	<p>January 2027</p>

## Special Needs Plan Alliance

marketing event		person event before enrollment ends. The 48-hour waiting period could be a barrier for beneficiaries selecting plan coverage, especially if they are meeting an agent or broker in their own living space.		
<p><b>Marketing: Timing of Personal Marketing Appointment after Scope of Appointment (SOA) Form Completion</b></p> <p>CMS is finalizing the proposal to eliminate the 48-hour waiting period required between the SOA completion and a personal marketing appointment, as well as eliminating the two corresponding exceptions to the 48-hour SOA rule.</p>	Support with reservation, we would have liked for the changes not to apply to FIDE SNPs, HIDE SNPs, or I-SNPs.	The 48-hour waiting period could be a barrier for beneficiaries selecting plan coverage, especially if they are meeting an agent or broker in their own living space. Separation would create serious issues for populations residing in institutions as well as those unlikely to drive or have resources to own a vehicle.	None	January 2027

## Special Needs --- --- Plan Alliance

<p><b>Marketing: Scope of Appointment (SOA) Forms at Educational Events</b> CMS is finalizing the proposal to permit plans and agents/brokers holding/participating in educational events with beneficiaries to make available and receive SOA forms at those same educational events</p>	Support	The SNP Alliance is concerned that a captive audience could be pressured to make coverage decisions in real-time during the interactions with agents, brokers, and plan marketing staff, and open health plans up to unintentional noncompliance.	None	January 2027
<p><b>Removal of SHIPs from Disclaimers</b> CMS will remove State Health Insurance Programs (SHIPs) as a source of information from the disclaimer</p>	Do Not Support	SHIPs have been providing Medicare counseling since 1990 and, in many communities, enabling local staff and volunteers to assist with Medicare program counseling and plan comparisons. Eliminating such a resource without a replacement could lead to serious access and choice issues.	None	January 2027

## Special Needs --- --- Plan Alliance

<p><b>Mid-Year Notice</b> CMS will rescind Mid-Year Supplemental Benefits Notice</p>	Support	The SNP Alliance expressed concern to CMS in the CY2025 MAPD Final Rule that operationalizing the mid-year notice of unused supplemental benefits would be challenging. We welcome the rollback of this provision.	None	NA
<p><b>Special Supplemental Benefits for the Chronically III (SSBCI) Eligibility Criteria</b> CMS will finalize a provision to require health plans to publicly share their SSBCI eligibility criteria.</p>	No Position	The SNP Alliance is supportive of the proposal to require reporting of SSBCI eligibility criteria on a plan's public-facing website.	None	January 2027

# Special Needs --- Plan Alliance

Final Summary Rule	SNP Alliance Comments	SNP Alliance Impact on Rule	SNP Alliance Action Steps	Implementation Timeline/Deadline
Title				
Title	Support/Do Not Support.	Comment	Action and Lead Work Group: MMI	Finalized with/without modifications effective.
<b>Quality Measures</b>				
<b>Star Measures</b> Proposed removal of 14 measure scores (12 measures, 2 of which were in Part C and D); decided to remove 13.	Supported some, but not all of these measures being removed.	SNP Alliance discussed the impact on SNPs with regard to loss of important measures – in terms of demonstrating value and in the Star Ratings calculation.  Some SNP types will be more severely impacted (e.g., I-SNPs) as there are few measures left for them on which to report.	Performance Evaluation Leadership Group	Finalized removal of 13 of the 14 measure scores.  Diabetes-Eye Exam retained.
<b>Star Measures</b> Addition of the Depression Screening & Follow-up Measure into Stars 2029.	Supported the measure concept.	Discussed value of the focus, but problems with the measure. Suggested modifications to the specifications and alignment with providers' measure on Depression.	Performance Evaluation Leadership Group	Finalized as proposed, but CMS' comments indicate interest in alignment so that there are not two Depression measures.

## Special Needs Plan Alliance

<b>Historical Reward Factor</b> Eliminating the EHO4A; returning to the historical reward factor	Supported return of the historical reward factor, but not complete elimination of the HEI.	SNP Alliance strongly urged for a Phase-in to recognize the plans, many of them SNPs, that had prepared for HEI.	Performance Evaluation Leadership Group	Finalized without modifications, effective immediately.
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Final Summary Rule	SNP Alliance Comments	SNP Alliance Impact on Rule	SNP Alliance Action Steps	Implementation Timeline/Deadline
Title	Support/Do Not Support.	Comment	Action and Lead Work Group: MMI	Finalized with/without modifications effective.
<b>D-SNP</b>				
<b>Continuity of Care</b> CMS finalized removing the similar networks requirements and instead will require receiving integrated D-SNPs to provide continuity of care for all incoming enrollees for a minimum of 120 days.	Support	Opposed proposal by CMS to include additional requirements that D-SNPs specify they have the care coordinator staffing capacity to receive dual eligible enrollees through passive enrollment.	MMI	Finalized without staffing capacity proposal.

## Special Needs --- Plan Alliance

<p><b>Continued Enrollment in Service Area with Medicaid FFS.</b> CMS finalized, subject to state policy, allow D-SNPs that serve full-benefit dually eligible individuals in a HIDE SNP or coordination-only D-SNP to continue enrollment of full-benefit dually eligible individuals in a D-SNP in the same service area where those individuals are enrolled in Medicaid fee-for-service.</p>	<p>Support with recommendations.</p>	<p>SNP Alliance opposed care coordination requirements but supported dual Medicaid FFS access to D-SNPs but sought clarification on a number of elements due to the confusing manner in which the proposed rule was composed.</p>	<p>MMI</p>	<p>Finalized without duplicative care coordination requirements.</p>
<p><b>Exemption to one D-SNP in Service Area</b> CMS finalized exempting MAOs operating in the U.S. Territories that have not adopted the Medicare Savings Programs from the requirement to only offer one D-SNP for FBDEs in the same service area.</p>	<p>No Position</p>	<p>No comment</p>	<p>MMI</p>	<p>Finalized without modification.</p>
<p><b>D-SNP Contract Termination</b> CMS finalized the codification of the process immediate termination of contract by CMS when the D-SNP does not have a SMAC.</p>	<p>Support with recommendations.</p>	<p>SNP Alliance made recommendations around beneficiary impact and year-end terminations to which CMS responded that they would work with States and D-SNPs to minimize beneficiary impact and prioritize access to integrated care.</p>	<p>MMI</p>	<p>Finalized without modification.</p>
<p><b>Multi-Contract Entity Number and D-SNP-only Contracts</b></p>	<p>Oppose with recommendations.</p>	<p>SNP Alliance opposed this proposal seeking</p>	<p>MMI</p>	<p>Finalized without modification.</p>

## Special Needs --- --- Plan Alliance

<p>CMS finalized that MAOs with D-SNP-only contracts cannot submit materials using the MA organization's multi-contract entity (MCE) number for D-SNP-only contracts, nor can third-party marketing organizations submit materials on behalf of the MA organization for D-SNP-only contracts using a multi-plan number.</p>		<p>clarification around language, encouraging continuing technical assistance, and making recommendations to CMS for some standardization. CMS deferred much of the responsibility to states on how they manage the review process.</p>		
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