

Medicare Care Choices Model Frequently Asked Questions

1. Q. What authority does CMS have to release this solicitation?

A. Section 1115A of the Social Security Act authorizes the Center for Medicare and Medicaid Innovation to test innovative payment and service delivery models to reduce program expenditures while preserving or enhancing the quality of care furnished to Medicare, Medicaid, and Children's Health Insurance Program beneficiaries.

2. Q. When are applications due? How long is the application period open?

A. Applications are due no later than June 19, 2014. The application period is open for 90 days from date of publication in the Federal Register.

3. Q. How will applications be reviewed and sites chosen?

A. The review of applications will be comprised of an evaluation and scoring by an internal review panel based on the requirements outlined in the Request for Applications. The outcome of this review will be submitted to the CMS approving official for a final decision.

4. Q. What providers are eligible to apply to this model?

A. The applicant must be a Medicare certified and enrolled hospice based on its Medicare provider number. CMS seeks a diverse group of hospices representative of various geographic areas, both urban and rural, and hospices of varying sizes. Further, the applicant must be able to demonstrate experience providing care coordination services and/or case management as well as shared decision-making to beneficiaries prior to electing the Medicare or Medicaid Hospice Benefit in conjunction with their referring providers/suppliers.

5. Q. What are the requirements for a beneficiary to participate?

A. To participate in the Medicare Care Choices Model and receive services from a participating hospice, beneficiaries with advanced cancers, chronic obstructive pulmonary disease, congestive heart failure and HIV/AIDS must meet Medicare hospice eligibility requirements under the Medicare hospice benefit, must not have elected the Medicare hospice benefit within the last 30 days prior to their participation in the Medicare Care Choices Model, and must have satisfied all of the eligibility criteria listed in the Beneficiary Eligibility and Enrollment Section of the Request for Applications.

6. Q. How does a hospice provider submit an application?

A. Applications must be mailed or hand delivered by the specified due date to the following address:

Centers for Medicare & Medicaid Services
Center for Medicare and Medicaid Innovation
Mail Stop WB-06-05
Attention: Cindy Massuda
7500 Security Blvd
Baltimore, Maryland 21244-1850