

2010

Risk Adjustment User Group



January Meeting Notes

Meeting Date: January 20, 2010

Meeting Time: 1:30 p.m. – 2:30 p.m. EST

In Attendance:

Panelists: Henri Thomas, Lateefah Hughes, Mary Guy, Ann Marshall, Louis Johnson, Paige Dent and Joyce Pedigo

(Participants should reference the PowerPoint slides when reviewing the notes from the User Group Session.)

Payment Process

Payment Questions Response Update

CMS reported progress on response rates to questions received from plans via the analyst@askriskadjustment.com email address. CMS' reported response rates are as follows:

- 100% October 2009
- 96% for November 2009
- 85% for December 2009

FAQ

Why does the Model Output Report not show all HCCs accepted by RAPS for a beneficiary?

The MOR reports the HCC with the most severe manifestation of the disease regardless if a less severe manifestation of the disease is also present during the data collection period. The payment model incorporates disease hierarchies and interactions to ensure accurate payment. For example, if you submit diagnoses that generate both HCC15 and HCC19 for a beneficiary, your MOR will only report HCC15, since this is the most severe manifestation and the HCC that your plan will be paid for.

A training initiative presented by



2010

Risk Adjustment User Group



January
Meeting Notes

Data Validation

2007 Data Validation Updates

- Pilot – Deadline for submission of corrective medical records and attestations was September 16, 2009. CMS will release the medical record receipt reports to the MA organizations. Upon receipt, the MA organization must review the reports for inconsistencies.
- Targeted Sample – CMS notified plans in November 2008 and the instructions packets were release on October 19, 2009. CMS conducted training in October for the selected plans. CMS received medical records and are in the process of releasing Technical Reports. The reports will assist Plans address medical issues with the medical records documentation.

The deadlines reported on the table below refer to coversheets, attestations and medical records, no later than 11:59 EST.

	Plans Notified of Stage Assignment	MAOs Receive Encrypted CD Containing Their Contract-Specific Data	Deadline for Submission of Coversheets, Attestations and Medical Records
Stage I	Oct. 23, 2009	Nov. 10, 2009	Feb. 9, 2010
Stage II	Nov. 13, 2009	Nov. 19, 2009	Feb. 18, 2010
Stage III	Dec. 4, 2009	Dec. 10, 2009	Mar. 11, 2010

A training initiative presented by



2010

Risk Adjustment User Group



January Meeting Notes

2008 National Data Validation Updates

- CMS uses the National Data Validation results to assist in determining the national payment error rate and notified the selected plans in December 2009 of their expected participation in the National Data Validation.
 - CMS completed an analysis and reported a 15.4 percent Part C error rate for payment year 2007. CMS will report at the end of the 2010 fiscal year a 2008 Part C national payment error rate.
- CMS will distribute an electronic submission version of the contact information sheet to plans to complete for the national sample. This will eliminate the need to print and submit hard copies of the contact information sheet.
- CMS mailed the instruction and enrollee data file via traceable mail on December 17, 2009.
- Deadline for submission of medical records, attestations and coversheets is March 12, 2010.
 - Plans may submit medical records via
 - *Virtual Private Network (VPN)
 - *Electronic Media (USB, CD, DVD)
 - Fax
 - Hardcopy

*File must be submitted using naming convention listed in the instruction packet

- Tips (CY2007 Targeted and CY2008 National)

A training initiative presented by



2010

Risk Adjustment User Group



January Meeting Notes

- When requesting completion of attestation, provide treating physician with a sample completed attestation and cover notes including dates of service.
- When requesting medical records, providers will be sent all the information necessary to comply with the request.
- Plans must adhere to CMS requirements when submitting documentation.
 - Sending beneficiary protected information via email may compromise Protected Health Information (PHI) and Personal Identifiable Information (PII). CMS will report plans sending PII or PHI via email to CMS Security Divisions.

Operations Update

Edit Code Update

Effective January 1, 2010, plans will no longer receive informational edit code 501. CMS has determined error code 501 is invalid in the current risk adjustment environment.

Contact CSSC Operations with questions at 1-877-534-2772.

Submission Information

Deadline for submission of CY2008 data is Sunday, January 31, 2010. To ensure sufficient time to edit discrepancies, CMS is suggesting submitting 2008 data by close of business Friday, January 29, 2010.

Operations FAQ

Q: How frequent are the RAPS Return Files delivered to the submitter's inbox?

A training initiative presented by



2010

Risk Adjustment User Group



January Meeting Notes

A: RAPS Return Files are delivered to the submitter the next business day following submission.

Technical Assistance Update

Next User Group meeting scheduled: Wednesday, February 17, 2010, at 1:30 p.m. EST.

A training initiative presented by

