

# 2009/2010 Risk Adjustment User Group



## November Meeting Notes

**Meeting Date:** November 18, 2009

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

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

### Topics:

#### Payment Process

#### Payment Questions Response Update

CMS reported progress on response rates to questions received from plans via the [analyst@askriskadjustment.com](mailto:analyst@askriskadjustment.com) email address. CMS' reported response rates are as follows as of November 2, 2009:

- 84% August 2009
- 73% for September 2009
- 50% for October 2009

The response rates are an increase from the 38% since CMS transition from the prior email address. Plans may experience delays in response to questions due to the review process. Once the questions are received, they will go through several levels of review prior to sending a response to ensure accuracy.

CMS is investigating reported issues with submission of questions to the email address. Plans should continue to submit payment questions to the [analyst@askriskadjustment.com](mailto:analyst@askriskadjustment.com) inbox. Questions submitted to other CMS staff may experience an increased delay since the CMS staff member must first retrieve and then forwards the question to the payment inbox for response.

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### Payment Updates

Plans initial January 2010 payment will include data submitted as of the 1<sup>st</sup> Friday of September. Initial payment begins on January 1, 2010.

### MA Coding Intensity

CMS will apply a MA Coding Intensity for more information access the Announcement at

<http://www.cms.hhs.gov/MedicareAdvtgSpecRateStats/Downloads/Announcement2010.pdf>. Plans should apply the MA coding adjustment and normalization factor to the reported risk scores on the MMR. Plans should apply the MA coding adjustment:

- CMS-HCC risk scores
  - Community and Institutional Aged
  - Community and Institutional Disabled
  - New Enrollee Aged
  - New Enrollee Disabled
  - Community and Institutional Post Graft
  - Post Graft New Enrollee

The MA Coding Intensity adjustment will not apply to

- CMS-HCC ESRD risk scores
  - Community
  - Institutional
  - New Enrollee
- Transplant scores
- Part D Risk Scores

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#### Submission Deadline

Final submission deadline for final 2009 payment is January 31, 2010. CMS will reflect the payment on the August 2010 MMR.

#### Reruns

A number of plans have made requests to submit corrected data. CMS will accept corrected data for dates of service 2005, 2006, and 2007. Plans that have not submitted requests and would like to do so, must contact Louis Johnson at [Louis.Johnson@cms.hhs.gov](mailto:Louis.Johnson@cms.hhs.gov) prior to submission.

#### Payment-Related FAQ

If a plan submitted diagnosis 496 for the 2007 dates of service year for a member who was deceased in March 2008, why does the plan receive payment for HCC108 in 2008?

The CMS-HCC model is a hierarchical model that imposes disease hierarchies. The submitted diagnoses would trigger HCC107 and HCC108, the plan would only receive payment for HCC107, the more severe HCC. The plan will receive payment as long as the date of service for the diagnoses submitted were prior to the beneficiary's date of death.

#### Data Validation

##### 2007 Data Validation Updates

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- Pilot – CMS extended the deadline for submission of corrected medical records to September 16, 2009. Currently CMS is reviewing Technical Assistance activities. CMS will forward two reports to contracts.
  - Technical Assistance Report – This report outlines technical assistance issues that contracts must resolve to move forward in the process. The report will contain deadlines for response and request plans to clarify provider type and dates of service to enable coders to know what Coding Guidelines to apply. CMS anticipates sending this report to contracts by November 17, 2009. If plans fail to respond CMS will communicate to the plans how CMS will handle the medical record data submitted.
  - Medical Record Receipt Log – Plans should validate this log with information sent to CMS and report any inconsistencies.
- Targeted Sample – CMS forwarded instruction packets on October 19, 2009 to selected plans. The packet included fictitious data providing the format of the data needed. Plans will have 12 weeks to submit medical records and attestations. CMS provided training on-site at CMS to selected plans on October 23, 2009.

CMS has identified three stages and timelines for the targeted sample.

	Plans Notified of	MAOs Receive	Deadline for
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	Stage Assignment	Encrypted CD Containing Their Contract-Specific Data	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	March 11, 2010

### 2008 Data Validation Updates

National Sample – Notification of selection will be released in December 2009.

### Operations Update

#### Operations FAQ

Q: Are any MA Organization's transaction reports audited by CMS?

A: Upon request, CMS will assist the MA Organization through an onsite consultation or other form of technical assistance.

### CSSC Operations Closing

CSSC will be closed in observance of Thanksgiving Holiday on Thursday November 26<sup>th</sup> and Friday November 27<sup>th</sup>. However, the Front-End Risk Adjustment System (FERAS) will be available during this time for RAPS submissions.

### Technical Assistance Update

Next User Group meeting scheduled: Wednesday, December 16, 2009, at 1:30 p.m. EST.

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