

**America's Health
Insurance Plans**

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August 26, 2014

Centers for Medicare & Medicaid Services
Office of Strategic Operations and Regulatory Affairs
Division of Regulations Development
Attention: CMS-10305 (OMB# 0938-1115)
Room C4-26-05
7500 Security Boulevard
Baltimore, MD 21244-1850

Re: CMS-10305 (OMB# 0938-1115)

Dear Sir or Madam:

I am writing on behalf of America's Health Insurance Plans (AHIP) in response to the notice under the Paperwork Reduction Act concerning the "Medicare Part C and Part D Data Validation" published by the Centers for Medicare & Medicaid Services (CMS) in the Federal Register (79 FR 33927) on June 13, 2014, with comment period extended through the notice published in the Federal Register on August 12, 2014. The proposed revisions to the standards for 2015 Part C and Part D data validations (Data Validation Standards) for contract year 2014 reported data are in proposed appendices to the Medicare Part C and Part D Reporting Requirements Data Validation Procedure Manual (Data Validation Manual) dated July 31, 2014 and posted by CMS on its PRA website. The proposed revisions are of significant interest to AHIP's member organizations, many of which participate in the Medicare Advantage (MA) and Medicare Part D Prescription Drug Benefit (Part D) programs. Our comments appear below.

GENERAL COMMENTS

Appendix 1 of Data Validation Manual (Appendix 1)

- **Consistency between Appendix 1's Data Validation Standards and Related CY 2014 Part C and Part D Reporting Requirements and Technical Specifications (Technical Specifications).** Page one, Appendix 1 provides that "[e]ach reporting section's *Data Validation Standards* include identical instructions relating to the types of information that will be reviewed, a set of validation standards (identical for each reporting section), and reporting section criteria that are based on the applicable *Part C/Part D Reporting Requirements Technical Specifications*." However, we have identified several instances, which are described below, where the Data Validation Standards in Appendix 1 are inconsistent with the Technical Specifications. We recommend that CMS review the



Data Validation Standards and the Technical Specifications in their entirety for consistency and revise the documents as needed.

SPECIFIC COMMENTS

Appendix 1

- **Section 2.3 – Organization Determinations/Reconsiderations (Part C) (page 7).** Item #6 of the Reporting Section Criteria for Appendix 1 indicates that for Data Element 6.1 of the Technical Specifications, the organization accurately calculates “the number of *fully favorable* organization determinations.” (emphasis added) This instruction that includes the phrase “fully favorable” appears to be inconsistent with Data Element 6.1 of the Part C Technical Specifications, which requires the reporting of the “total number of organization determinations made in [the applicable] reporting time period.” (See Data Element 6.1, page 13). AHIP recommends that CMS review and revise the language in the Standards to conform with the Data Element 6.1 language in the Part C Technical Specifications.
- **Sections 2.5 and 2.9 – Plan Oversight of Agents (Part C and Part D) (pages 14-16, 35-37).** Page one, Appendix 1 provides that to ensure alignment of terminology used in the Data Validation Manual with the Technical Specifications, CMS has replaced the term “measure” with “reporting section” and the term “measure-specific criteria” with “reporting section criteria.” However, there are several places in Sections 2.5 and 2.9 of Appendix 1 (such as item 2 of the Validations Standards subsection) where the terminology has not been revised. AHIP recommends that CMS review the data validation documents and revise the terminology accordingly.
- **Section 2.7 – Coverage Determinations and Redeterminations (Part D) (page 27).** Item #13 under the Reporting Section Criteria of Section 2.7 for Appendix 1 indicates that for Data Element 1.N the organization accurately calculates “the number of coverage determinations decisions processed timely.” However, Note 14 in the corresponding Part D Technical Specifications states that certain untimely cases should also be included in Data Element 1.N (See Note 14, page 62). Note 14 appears to conflict with the Data Validation Standard described in Item #13. AHIP recommends that CMS resolve this inconsistency between the Standards and the Part D Technical Specifications by making necessary revisions to Note 14.

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We have appreciated the opportunity to comment. Please contact me if additional information would be helpful or if you have questions about the issues we have raised. I can be reached at (202) 778-3256 or mhamelburg@ahip.org.

Sincerely,

A handwritten signature in black ink, appearing to read "Mark Hamelburg". The signature is fluid and cursive, with a long, sweeping underline that extends to the right.

Mark Hamelburg
Senior Vice President, Federal Programs