

PUBLIC SUBMISSION

As of: 5/28/19 3:45 PM Received: May 28, 2019 Status: Draft Tracking No. 1k3-9a5v-qxxn Comments Due: May 28, 2019 Submission Type: Web

Docket: CMS-2019-0056

Medicare Part C and Part D Data Validation (42 CFR 422.516g and 423.514g) (CMS-10305)

Comment On: CMS-2019-0056-0001

Agency Information Collection Activities; Proposals, Submissions, and Approvals

Document: CMS-2019-0056-DRAFT-0006

Submitter Information

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General Comment

CMS-10305; OMB control number: 0938-1115

For the two changes below (RSC 12 and RSC 6) -- the sections reference "provider on behalf of the enrollee", does this include contracted and non-contracted providers?

The new RSC 12. a. Includes all adverse service reconsideration determinations requested by enrollee/representative, or provider on behalf of the enrollee, or non-contract provider (Subsection #4, Data Elements I and J).

RSC 6.a. Includes all completed organization determinations (Part C only) for services requested by an enrollee/representative, a provider on behalf of the enrollee, or a non-contract provider, and all organization determinations for claims submitted by enrollee/representative or non-contract provider with a date of member notification of the final decision that occurs during the reporting period, regardless of when the request for organization determination was received.