DEPARTMENT OF HEALTH & HUMAN SERVICES Centers for Medicare & Medicaid Services 7500 Security Boulevard Baltimore, Maryland 21244-1850



## **CENTER FOR MEDICARE**

**DATE:** March 29, 2022

TO: All Medicare Advantage Organizations, Part D Sponsors, and Medicare-Medicaid

Plans

**FROM:** Amy Larrick Chavez-Valdez

Director, Medicare Drug Benefit and C & D Data Group

**SUBJECT:** 2022 Data Validation of Medicare Part C and Part D Reporting Requirements

Data

Retrospective data validation (DV) must be conducted annually of the Part C and D reporting requirements data reported per 42 C.F.R. §422.516(g) and §423.514(j). In order to ensure the reliability of the data reported, each Part C and D sponsor must select a DV reviewer (contractor) to conduct the audit independently.

Per the Medicare Part C and D Reporting Requirements Data Validation Procedure Manual Appendix A: Standards for Selecting a Data Validation Contractor, we remind sponsors that in order to ensure the independence of the DV contractor, sponsoring organizations (SOs) may not use their own staff to conduct the DV review. Also, companies that provide management consulting or assist the SO with its reporting procedures, reporting processes, or information systems used in storing, compiling, or reporting the Part C and/or Part D Reporting Requirements data to CMS may not serve as the DV contractor for that SO for any given reporting period. Management consultation activities include performing mock audits, preassessments, and any other types of reviews on reported data. Exhibit 1 in Appendix A provides additional guidance on whether an entity's relationship with an SO meets CMS' standard for organizational independence in conducting the DV review.

The 2022 DV cycle will take place from April 1 to June 30, 2022 for 2021 data submitted for the following reporting sections by March 31, 2022: Part C Grievances, Organization Determinations/Reconsiderations and Special Needs Plans (SNPs) Care Management; and Part D Grievances, Medication Therapy Management Programs (MTM), Improving Drug Utilization Review Controls (DUR), and Coverage Determinations/Redeterminations. Data submitted or resubmitted after March 31, 2022 cannot be used for purposes of the DV. The deadline for reviewers to submit annual DV findings to CMS is June 30, 2022.

CMS has released the 2022 Data Validation documents:

- DV Procedure Manual
- Appendix A
- Appendix B
- Appendix C
- Appendix D
- Appendix E
- Appendix F
- Appendix G
- Appendix H
- Appendix I
- Appendix J (FDCF)
- Appendix K

These documents are posted on the HPMS Plan Reporting site and on the external CMS website at the following link: <a href="https://www.cms.gov/Medicare/Prescription-Drug-Coverage/PrescriptionDrugCovContra/PartCDDataValidation.html">https://www.cms.gov/Medicare/Prescription-Drug-Coverage/PrescriptionDrugCovContra/PartCDDataValidation.html</a>.

The 2022 Data Validation web-based training is available on cms.gov on the MLN page: <a href="https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNProducts/WebBasedTraining">https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNProducts/WebBasedTraining</a>

Questions regarding 2022 Data Validation should be sent via email to PartCandD Data Validation@cms.hhs.gov.