MEDICARE DRUG BENEFIT AND C & D DATA GROUP

DATE: September 28, 2018

TO: All Medicare Advantage Organizations, Part D Sponsors, Medicare-Medicaid Plans and 1876 Cost Plans

FROM: Amy Larrick Chavez-Valdez, Director, Medicare Drug Benefit and C&D Data Group

RE: Results of the 2018 Part C and D Reporting Requirements Data Validation

Organizations contracted to offer Medicare Part C and/or Part D benefits are required to submit data to the Centers for Medicare and Medicaid Services (CMS) per the Medicare Part C and D Reporting Requirements. The data are subject to validation through an independent yearly review in order to ensure they are reliable, valid, complete, comparable, and timely. The data validation reviews of contract year (CY) 2017 Medicare Part C and D data were conducted between April 1, 2018 and June 30, 2018, and we are pleased to announce the results of those reviews.

A total of 553 Medicare Advantage contracts and stand-alone Prescription Drug Plans completed data validation. Validation of contracts with both Part C and Part D benefits was conducted on 480 contracts, validation of contracts with Part C-only benefits was conducted on 14 contracts, and validation of contracts with only Part D benefits was completed on 59 contracts. Table 1 below contains a statistical summary of the data validation scores.

Table 1: Statistical Summary of Overall Data Validation Scores*

Score	No. of Contracts Validated	Minimum Score	Maximum Score	Mean Score	Standard Deviation
Part C Only	14	94%	100%	99.3%	1.6%
Part D Only	59	73%	100%	99.4%	3.5%
Both Part C and Part D	480	95%	100%	99.8%	0.7%
Overall Part C	494	90%	100%	99.6%	1.3%
Overall Part D	539	73%	100%	99.8%	1.3%
Overall Combined Part C and D	553	73%	100%	99.7%	1.3%

*Data Source: HPMS Plan Reporting Data Validation Module. Data tabulated in August 2018.

Table 2 presents the distribution of the overall data validation scores. A total of 2 contracts (0.4%) scored below 95% (rounded to the nearest whole number). In comparison, 6 contracts scored below 95% in the 2017 data validation cycle of CY 2016 plan-reported data.

Contracts scoring below 95% on the overall Part C, Part D, or combined score and in active status in CY 2018 will be required to submit remediation plans to CMS and will be contacted by CMS in the near future.

Table 2: Distribution of Overall Data Validation Scores*

Overall Score	No. Contracts	Percent of Total Contracts (%)	Cumulative Percent of Total Contracts (%)
73%	1	0.2	0.2
94%	1	0.2	0.4
95%	2	0.4	0.7
96%	3	0.5	1.3
97%	4	0.7	2.0
98%	17	3.1	5.1
99%	44	8.0	13.0
100%	481	87.0	100.0
Total	553		

*Data Source: HPMS Plan Reporting Data Validation Module. Data tabulated in August 2018. Scores rounded to nearest whole percent. Tables 2-4 mutually exclusive.

Table 3 displays the distribution of the overall Part C data validation scores. Out of 494 contracts, 12 (2.4%) scored below 95%.

Table 3: Distribution of Part C Data Validation Scores*

Overall Score	No. Contracts	Percent of Total Contracts (%)	Cumulative Percent of Total Contracts (%)
90%	2	0.4	0.4
91%	1	0.2	0.6
92%	1	0.2	0.8
93%	4	0.8	1.6
94%	4	0.8	2.4
96%	3	0.6	3.0
97%	8	1.6	4.7
98%	8	1.6	6.3
99%	52	10.5	16.8
100%	411	83.2	100.0
Total	494		

*Data Source: HPMS Plan Reporting Data Validation Module. Data tabulated in August 2018. Scores rounded to nearest whole percent. Tables 2-4 mutually exclusive.

Table 4 contains the distribution of the overall Part D data validation scores. Out of 539 contracts, 2 (0.4%) scored below 95%.

Table 4: Distribution of Part D Data Validation Scores*

Overall Score	No. Contracts	Percent of Total Contracts (%)	Cumulative Percent of Total Contracts (%)
73%	1	0.2	0.2
92%	1	0.2	0.4
96%	1	0.2	0.6
97%	4	0.7	1.3
98%	9	1.7	3.0
99%	32	5.9	8.9
100%	491	91.1	100.0
Total	539		

*Data Source: HPMS Plan Reporting Data Validation Module. Data tabulated in August 2018. Scores rounded to nearest whole percent. Tables 2-4 mutually exclusive.

Table 5 displays a statistical summary of the data validation scores by reporting section. Improving Drug Utilization Controls had the highest mean score (99.87%) and Special Needs Plan Care Management had the lowest mean score (99.53%).

Table 5: Statistical Summary of 2017 Reporting Section Data Validation Scores*

Reporting Section	No. of Contracts Validated	Minimum Score	Maximum Score	Mean Score	Standard Deviation
Part C					
Grievances	494	80%	100%	99.57%	1.99%
Organization Determinations & Redeterminations	494	81%	100%	99.63%	1.48%
Special Needs Plan Care Management	216	69%	100%	99.53%	2.20%
Part D					
Coverage Determinations & Redeterminations	539	88%	100%	99.73%	1.25%
Grievances	539	73%	100%	99.80%	1.48%
Medication Therapy Management Programs	535	0%	100%	99.80%	4.32%
Improving Drug Utilization Review Controls	539	89%	100%	99.87%	0.77%

*Data Source: HPMS Plan Reporting Data Validation Module. Data tabulated in August 2018.

A total of 15 contracts (2.7%) scored below 95% for overall average and/or below 95% for Part C average, and/or below 95% for Part D average, and/or below 95% on all three scores.

Sponsors may view their individual contracts' 2018 data validation results in HPMS. Go to HPMS (https://hpms.cms.gov). Then navigate to Monitoring, followed by Plan Reporting Data Validation, choose CY 2017 (DV period April - June, 2018), and then PRDVM Reports. Please submit any questions or comments to the dedicated CMS Part C and D data validation email box at: PartCandD_Data_Validation@cms.hhs.gov.