

DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
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CENTER FOR MEDICARE

DATE: May 29, 2020

TO: All Medicare Advantage, Cost, PACE, and Demonstration Organizations Systems Staff

FROM: Jennifer R. Shapiro, Director, Medicare Plan Payment Group

SUBJECT: Release of Encounter Data Report Cards Q1 2020 – Information

To support the submission of encounter data,¹ CMS has initiated a series of efforts aimed at providing feedback and technical assistance to, and soliciting input from, stakeholders. These efforts include distribution of quarterly report cards, one-to-one communication with plans to resolve technical issues and to gather information about submission challenges, and increased frequency of user group calls with a focus on discussions related to specific submission topics.

This memo announces the availability of the Q1 2020 encounter data report cards in the Health Plan Management System (HPMS). Each report card presents information on the encounter data submitted by your organization.

Note that Medicare Medicaid Plans (MMP) contracts now have Section 1B – Top Edits in their reports. In addition, please note that the technical notes can be downloaded from HPMS when downloading the report card, by clicking on the “Technical Notes” link located on the same page as the report card.

To access the report cards, follow this path:

**HPMS Home Page > Risk Adjustment > Encounter Data Report Card > 2020
May Update**

Questions and Comments

Questions and comments can be addressed to encounterdata@cms.hhs.gov with the subject heading “Encounter Data Report Card- Q1 2020.” Thank you.

¹Under 42 C.F.R. § 422.310, Medicare Advantage Organizations (MAOs) and other entities under Part C rules are required to submit encounter data for each item and service provided to an MA enrollee. As required under § 422.310(b): Each MA organization must submit to CMS (in accordance with CMS instructions) the data necessary to characterize the context and purposes of each item and service provided to a Medicare enrollee by a provider, supplier, physician, or other practitioner. Additionally, under § 422.310(d): MA organizations must submit data that conform to CMS’ requirements for data equivalent to Medicare fee-for-service data, when appropriate, and to all relevant national standards.