

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



CENTER FOR MEDICARE

DATE: May 25, 2022

TO: All Medicare Advantage Organizations, PACE Organizations, Medicare-Medicaid Plans, Section 1876 Cost Contractors, and Demonstrations

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

SUBJECT: Rerun of Payment Year (PY) 2015

This memo is to notify Medicare Advantage Organizations, PACE Organizations, Medicare-Medicaid Plans, Section 1833 Cost Contractors and Section 1876 Cost Contractors, and any demonstration plans that submit risk adjustment data of an upcoming rerun of Payment Year (PY) 2015.

CMS has informed organizations through Health Plan Management System (HPMS) memorandums about updates made to the MAO-004 reports and to the Risk Adjustment Processing System (RAPS) and Risk Adjustment System (RAS). A list of the relevant HPMS memos are referenced below:

- *Risk Adjustment Processing System 408, 409, and 410 Edit Update and Risk Adjustment Model Run Impact*, published May 6, 2020,
- *Updated Version of the MAO-004 Reports (Phase IV Version 0) and Re-issuing of the Historical MAO-004 Reports in the New Version*, published on July 21, 2020,
- *Risk Adjustment Processing System (RAPS) and Risk Adjustment System (RAS) Updates*, published October 2, 2020, and
- *Correction to Risk Adjustment Processing System (RAPS) and Risk Adjustment System (RAS) Updates HPMS Memo dated October 2, 2020*, published November 16, 2020

CMS will be rerunning PY 2015 to process the data corrections related to these HPMS memos. In addition, per the April 15, 2022 HPMS memo, *Reminder of Existing Obligation to Submit Accurate Risk Adjustment Data*, CMS will include in this rerun closed-period deletes (i.e., diagnoses deleted after the deadline for final reconciliation payments) for PY 2015. Section 1128J(d) of the Social Security Act requires that overpayments received under title XVIII or XIX to which an entity is not entitled, must be reported and returned no later than 60 days after it was identified by the entity. Once an MA organization has identified that incorrect diagnosis data were submitted, the MA organization is responsible for reporting the overpayment in the Risk Adjustment Overpayment Reporting (RAOR) module in HPMS, and deleting the incorrect diagnosis data through the established submission process (i.e., RAPS and/or Encounter Data

Processing System (EDPS)) (42 CFR 422.310(d)(2)). To access the RAOR module, follow this path: HPMS Home Page > Risk Adjustment > Risk Adjustment Overpayment Reporting. The deadline to submit all PY 2015 (2014 dates of service) deletions to the Risk Adjustment Processing System (RAPS) is **8:00 PM EDT, Thursday, June 30th, 2022**. We are not processing Encounter Data deletes in this run.

Finally, as with all payment runs, Medicaid, Long Term Institutional (LTI), and End Stage Renal Disease (ESRD) statuses will be updated with the most current information for PY 2015, and will be identified on Monthly Membership Report (MMR) for this run. Medicare Advantage and Prescription Drug (MARx) payment adjustments as a result of this risk score run will be identified on the MMR by the Adjustment Reason Code (ARC) 25 – Part C Risk Adjustment Factor Change/Recon and ARC 37 – Part D Risk Adjustment Factor Change.

For questions relating to overpayments, please email riskadjustmentpolicy@cms.hhs.gov and specify “HPMS memo – Rerun of Payment Year (PY) 2015” in the subject line. For all other questions related to this memo, please email riskadjustmentoperations@cms.hhs.gov and specify “HPMS memo - Rerun of Payment Year (PY) 2015.”