



MEDICARE DRUG BENEFIT AND C & D DATA GROUP

DATE: September 20, 2019

TO: All Medicare Advantage Organizations, Prescription Drug Plan 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 2019 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^{1,2}. The data are subject to validation through an independent yearly review in order to ensure they are reliable, valid, complete, comparable, and timely³. The data validation reviews of contract year (CY) 2018 Medicare Part C and D data were conducted between April 1, 2019 and June 30, 2019, and we are pleased to announce the results of those reviews.

A total of 581 Medicare Advantage and Prescription Drug Plan Sponsor contracts completed data validation. Validation of contracts with both Part C and Part D benefits was conducted on 516 contracts, validation of contracts with Part C-only benefits was conducted on 9 contracts, and validation of contracts with only Part D benefits was completed on 56 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	9	89%	100%	98.0%	3.9%
Part D Only	56	75%	100%	99.5%	3.3%
Both Part C and Part D	516	88%	100%	99.7%	1.0%
Overall Part C	525	83%	100%	99.5%	1.7%
Overall Part D	572	75%	100%	99.8%	1.5%
Overall Combined Part C and D	581	75%	100%	99.6%	1.5%

*Data Source: HPMS Plan Reporting Data Validation Module. Data tabulated in August 2019.

¹ Part C Reporting Requirements can be found at: <http://www.cms.gov/Medicare/Health-Plans/HealthPlansGenInfo/ReportingRequirements.html>

² Part D Reporting Requirements: http://www.cms.gov/Medicare/Prescription-Drug-Coverage/PrescriptionDrugCovContra/RxContracting_ReportingOversight.html

³ Part C and D Reporting Requirements Data Validation materials can be found at: <https://www.cms.gov/Medicare/Prescription-Drug-Coverage/PrescriptionDrugCovContra/PartCDDDataValidation.html>

Table 2 presents the distribution of the overall data validation scores. A total of 6 contracts (1.0%) scored below 95% (rounded to the nearest whole number). In comparison, 2 contracts scored below 95% in the 2018 data validation cycle of CY 2017 plan-reported data.

CMS will contact active CY 2019 contracts scoring below 95% on the overall Part C, Part D, or combined score.

Table 2: Distribution of Overall Data Validation Scores*

Overall Score	No. Contracts	Percent of Total Contracts (%)	Cumulative Percent of Total Contracts (%)
75%	1	0.17	0.17
88%	1	0.17	0.34
89%	1	0.17	0.52
91%	1	0.17	0.69
93%	1	0.17	0.86
94%	1	0.17	1.03
95%	4	0.69	1.72
96%	2	0.34	2.07
97%	10	1.72	3.79
98%	15	2.58	6.37
99%	34	5.85	12.22
100%	510	87.78	100.00
Total	581		

*Data Source: HPMS Plan Reporting Data Validation Module. Data tabulated in August 2019. 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 525 contracts, 11 (2.1%) 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 (%)
83%	1	0.19	0.19
88%	1	0.19	0.38
89%	2	0.38	0.76
90%	1	0.19	0.95
91%	2	0.38	1.33
92%	2	0.38	1.71
93%	1	0.19	1.90
94%	1	0.19	2.10
95%	6	1.14	3.24
96%	8	1.52	4.76
97%	6	1.14	5.90
98%	8	1.52	7.43
99%	29	5.52	12.95
100%	457	87.05	100.00
Total	525		

*Data Source: HPMS Plan Reporting Data Validation Module. Data tabulated in August 2019. 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 572 contracts, 3 (0.5%) 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 (%)
75%	2	0.35	0.35
93%	1	0.17	0.52
96%	1	0.17	0.70
97%	2	0.35	1.05
98%	4	0.70	1.75
99%	27	4.72	6.47
100%	535	93.53	100.00
Total	572		

*Data Source: HPMS Plan Reporting Data Validation Module. Data tabulated in August 2019. 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. Part D Grievances had the highest mean score (99.9%) and Special Needs Plan Care Management had the lowest mean score (98.9%).

Table 5: Statistical Summary of 2018 Reporting Section Data Validation Scores*

Reporting Section	No. of Contracts Validated	Minimum Score	Maximum Score	Mean Score	Standard Deviation
Part C:					
Grievances	525	72%	100%	99.43%	3.03%
Organization Determinations & Redeterminations	525	89%	100%	99.76%	0.95%
Special Needs Plan Care Management	218	72%	100%	98.94%	3.75%
Part D:					
Coverage Determinations & Redeterminations	572	86%	100%	99.86%	0.77%
Grievances	572	92%	100%	99.90%	0.64%
Medication Therapy Management Programs	569	0%	100%	99.64%	5.92%
Improving Drug Utilization Review Control	572	73%	100%	99.82%	1.50%

*Data Source: HPMS Plan Reporting Data Validation Module. Data tabulated in August 2019.

A total of 14 contracts (2.4%) 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' 2019 data validation results in HPMS. Go to HPMS (<https://hpms.cms.gov>). Then navigate to Monitoring, followed by Plan Reporting Data Validation, choose CY 2018 (DV period April - June, 2019), 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.