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DATE: December 12, 2017

TO: All Medicare Advantage Organizations and Prescription Drug Plans

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SUBJECT: Timeliness Monitoring Project (TMP)

This memo announces that CMS will again be conducting an industry wide monitoring project, collecting data to evaluate the timeliness of processing of Medicare Advantage (Part C) organization determinations and reconsiderations and Medicare Prescription Drug (Part D) coverage determinations and redeterminations.¹ Effective appeals processing by sponsors is one of the most critical areas of the Part C and Part D programs. These programs provide key beneficiary protections to access essential medical care and/or prescription medications, however Medicare Parts C and D audits have consistently identified performance issues in these areas.

Only those organizations with active contracts in both CY2017 and CY2018 will be subject to this monitoring effort. In addition, all PACE, Medicare-Medicaid Plan (MMP), MSA, Employer/Union Only Direct ('E' contracts), and 1833 Health Care Prepayment Plan (HCPP) contracts are excluded from this data submission. This is a retrospective collection of 2017 data. Sponsors who underwent a program audit in 2017 will not have to resubmit data for this request if they successfully submitted the Coverage Determination, Appeals and Grievances (CDAG) and Organization Determinations, Appeals and Grievances (ODAG) universes without any Invalid Data Submission (IDS) conditions and had at least one month of 2017 data for each of the universes listed below. Sponsors can refer to their preliminary draft audit report for any IDS conditions. Sponsors who had an IDS condition for any of the universes listed below will only be required to resubmit the affected universe(s). Sponsors that underwent an audit validation in 2017 are not exempt from this collection.

CMS reminds Part C and Part D sponsors that this monitoring effort will provide all sponsors the ability to demonstrate their Independent Review Entity (IRE) data are accurate and valid for use

¹ This collection is included in CMS-10191.

in CMS' Star Ratings. We are continuing this large scale project in response to some sponsors' concerns that targeted reviews that accompany program audits do not sufficiently assess all contracts. We appreciate sponsors' continued support and engagement in improving compliance to Parts C and D requirements, and CMS quality measurement programs.

CMS takes the integrity of the data used to inform Part C and Part D Star Ratings very seriously, and we want to ensure only the most complete and accurate data are used. Information from the Medicare Parts C and D audits on sponsor's processing and operational issues is one means of evaluating the integrity and completeness of the IRE data. CMS considers data integrity issues, if identified, as an indicator that a contract's measure data are invalid for the Star Ratings. CMS may also independently evaluate the data to gain insight into sponsors' performance in these two program areas.

Operational Details of Timeliness Monitoring Project

We will again be conducting this collection in three waves, the first wave of letters requesting data will be issued in January 2018. CMS will collect ODAG and CDAG audit universes from each contract to assess all sponsors' timeliness in processing both Part C and D requests, as well as sponsor compliance with forwarding cases to the IRE.

Organizations will receive a data request email from the following mailbox:

TimelinessMonitoring@cms.hhs.gov. This email will include additional instructions on the time period being tested, how to submit the data through the Secure File Transfer Protocol (SFTP), actual deadlines for submission, and information on when validation webinars will be scheduled.

CMS is utilizing two support contractors to collect and analyze these data. Those contractors are David James, LLC and Conrad. David James, LLC has Booz Allen Hamilton as a subcontractor and Conrad has Myers & Stauffer as a subcontractor. Sponsors will receive emailed communications from one of these organizations regarding the data submission. Please make note of these organizations' names so future emails will be identified as legitimate communications on behalf of CMS.

Sponsors are expected to submit the requested data via SFTP within 15 business days (excluding federal holidays) after receiving the request. Many sponsors already set up accounts as part of their CMS program audit or as part of the Timeliness Monitoring Project (TMP) last year. Only one individual per organization will be granted access to the SFTP. You can check your access at the following website: <https://transfer.mslc.com/>. By December 22nd, 2017 please email CMSProgramAudits@mslc.com and provide one of the following responses:

1. We do not have an existing SFTP user and need to establish an account (Provide the full name, email, and phone number of the individual that will be assigned to the account).
2. We have an existing user and would like that account terminated (provide name and email) and replaced with (provide name and email).
3. We have an existing user who should remain on the account, but we need an updated/reset

password.

4. We have an existing user who should remain on the account and we are able to successfully log into the SFTP site.

The following universes, using the 2017 audit protocol templates, will be requested:

CDAG:

- Table 1: Standard Coverage Determinations (SCD) Record Layout
- Table 2: Standard Coverage Determination Exception Requests (SCDER) Record Layout
- Table 3: Direct Member Reimbursement Request Coverage Determinations (DMRCD) Record Layout
- Table 4: Expedited Coverage Determinations (ECD) Record Layout
- Table 5: Expedited Coverage Determination Exception Requests (ECDER) Record Layout
- Table 6: Standard Redeterminations (SRD) Record Layout
- Table 7: Direct Member Reimbursement Request Redeterminations (DMRRD) Record Layout
- Table 8: Expedited Redeterminations (ERD) Record Layout
- Table 9: Standard IRE Auto-forwarded Coverage Determinations and Redeterminations (SIRE) Record Layout
- Table 10: Expedited IRE Auto-forwarded Coverage Determinations and Redeterminations (EIRE) Record Layout

ODAG:

- Table 1: Standard Pre-service Organization Determinations (SOD) Record Layout
- Table 2: Expedited Pre-service Organization Determinations (EOD) Record Layout
- Table 3: Requests for Payment Organization Determinations (Claims) Record Layout
- Table 4: Direct Member Reimbursement (DMR) Requests Record Layout
- Table 5: Standard Pre-service Reconsiderations (SREC) Record Layout
- Table 6: Expedited Pre-service Reconsiderations (EREC) Record Layout
- Table 7: Requests for Payment Reconsiderations (PREC) Record Layout

The time period requested will be March through May 2017. The same enrollment bands listed in the ODAG and CDAG audit protocols will be used to determine the amount of data to be collected from each sponsor. Sponsors with a total enrollment (across all contracts subject to this monitoring project) over 250,000 enrollees will submit one month of data (March) for each of the above universes, sponsors with an enrollment of 50,000 to 250,000 enrollees will submit two months of data (March, April), and sponsors with an enrollment of less than 50,000 enrollees will submit three months of data (March, April, and May). Sponsors are reminded that this data request is similar to the collection for program audits. Universe submissions should include data processed in-house and by all First Tier, Down-stream, and Related entities (FDRs) on their behalf. All universes will be submitted at the Parent Organization level, based on November 2017

total enrollment across all contracts subject to this monitoring project; therefore, one universe submission may include data for multiple contracts.

The 2017 program audit protocols can be located in the *Downloads* section at the bottom of the following page:

<https://www.cms.gov/Medicare/Compliance-and-Audits/Part-C-and-Part-D-Compliance-and-Audits/ProgramAudits.html>

Once data are received, CMS will review the data and schedule a validation webinar to ensure that the data provided in the universes match the data in the sponsor's systems. If data are found to not be valid, sponsors will be required to resubmit data and undergo another validation. Failure to successfully submit universes may result in compliance actions by CMS.

CMS will run a timeliness analysis on all validated universes and determine a rate of timeliness for each case type. The findings will be reviewed and may result in compliance actions, if necessary, and may have implications for the Star Ratings data integrity reviews for the four appeals measures.

Questions regarding this monitoring project can be sent to TimelinessMonitoring@cms.hhs.gov.

Questions about the monitoring project and the Star Ratings program can be sent to PARTCDQA@cms.hhs.gov.