



## **CENTER FOR DRUG and HEALTH PLAN CHOICE**

TO: All Medicare Advantage HMOs, PPOs, PFFS, §1876 Cost contractors

FROM: Cynthia G. Tudor, Ph.D., Director, Medicare Drug Benefit and C & D Data Group

SUBJECT: HEDIS 2010 Patient-Level Data Submission

DATE: February 18, 2010

Medicare managed care contracts that are required to report HEDIS 2010 summary level data for the 2009 measurement year must also provide the patient-level data used to calculate the summary level-data for each Medicare Advantage contract. Summary and patient-level data are due on June 30, 2010. Submission of the patient-level HEDIS data is not required for the SNP-specific measures.

The Centers for Medicare & Medicaid Services (CMS) has placed updated versions of the following documents at <http://www.cms.hhs.gov/MCRAAdvPartDENrolData/> :

- 2010 Patient-level file specifications (dated, January 22, 2010)
- 2010 Patient-level data submission instructions (dated, January 22, 2010)

CMS has also posted the following document to assist you in the creation of your 2010 patient-level file.

- Crosswalk document showing changes from 2009 to 2010 patient-level file specifications

Please use the 2010 documents for the creation of the 2010 patient-level files. Be sure to deliver the updated versions of these documents to your NCQA-Certified HEDIS Compliance Auditor and any third-party vendor submitting data on your behalf.

### **Patient-Level HEDIS submission information**

You will be submitting your 2010 patient-level HEDIS data using the secure CMS Enterprise FTP client system that you currently use to submit other beneficiary specific information to CMS. You will use your existing GENTRAN or Connect:Direct account to upload your patient-level data files using the file naming conventions that are specified in the 2010 patient-level submission instructions. If you utilize the services of a third party vendor to submit information to GENTRAN or Connect:Direct, please notify them that you are required to submit HEDIS patient-level data so that, if you desire, they can submit the file you create. In the event a data file does not pass validation, you should inform your vendor that they will also need to submit any corrected data files as necessary.

CMS's contractor, Health Care Dynamics International (HCDI), will access your patient-level data through the same secure system, and will perform validations of your data. For those who have been designated as a "Point of Contact" (POC), a password will be issued to allow you to view the status of your data file(s) via the HEDIS Patient-Level Web Portal at <http://mapld.hcdi.com>. HCDI is performing this activity under contract to CMS, and is accountable for adhering to Federal laws and regulations regarding security and confidentiality of personally identifiable information and protected health information.

For questions about the 2010 patient-level file specifications and submission process, please contact [MA\\_Patient\\_Data@hcdi.com](mailto:MA_Patient_Data@hcdi.com). For questions about HEDIS summary-level data submission, please contact your HEDIS account manager at NCQA.

***Please note the following:***

- As has always been the case, it is important that your patient-level data match your summary-level data when aggregated at the contract level.
  - The 2010 patient-level file specifications require you to provide some additional information for each beneficiary included in your file: 1) the Plan-Id in which the beneficiary is enrolled; 2) whether the beneficiary is enrolled in a Special Needs Plan (SNP), and if so, the type of SNP; 3) last name; 4) first name; (5) city; (6) state; (7) zip code; (8) gender; and (9) date of birth.
- The three-digit Plan-Id number field corresponds to the plan benefit package (PBP) number that the beneficiary is enrolled in/assigned as of the end (12/31/2009) of the measurement year.
- The one-digit SNP enrollee type field for the beneficiary corresponds to the type of SNP plan that the beneficiary is enrolled in at the end of the measurement year. If the enrollee is not in a SNP plan, the appropriate code for this field is „0". For more information about the three SNP types, you may consult the following website:  
<http://www.cms.hhs.gov/SpecialNeedsPlans/>.

CMS is currently seeking volunteers for testing the 2010 patient-level submission process and would welcome your participation. Beginning April 1, 2010 through April 30, 2010, plans or third-party vendors may submit test data files to CMS via Gentran or Connect:Direct. This testing period is being offered to plans that would like to verify their Gentran or Connect:Direct connection and to find programmer or logic errors prior to the official submission period. For more information about providing a test submission, please read the "Patient-Level Data Submission Overview" section of the Submission Instructions or contact [MA\\_Patient\\_Data@hcdi.com](mailto:MA_Patient_Data@hcdi.com).

For questions about this memo, please contact Barbara Crawley at 410-786-6590 or [Barbara.Crawley@cms.hhs.gov](mailto:Barbara.Crawley@cms.hhs.gov).