



### **Timeliness Monitoring**

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Jennifer Smith: Good afternoon everyone. I'm Jennifer Smith. I'm the Director of the Division of Analysis Policy and Strategy in the Medicare Parts C and D Oversight and Enforcement Group. First of all, before I get started, I just wanted to say that obviously the Timeliness Monitoring Project was a new monitoring project for 2017. CMS, my group in particular, had a goal of collecting all of the data for the Timeliness Monitoring Project, validating that that data was accurate, running timeliness tests and then sending both the summary and source data over to our colleagues in MDBG to do their analysis. So we had a goal of completing that by early May, and we did that. And I say congratulations to all of you, as well as congratulations internally, as we were very grateful for all of your partnership in being able to meet that deadline.

With that being said, the real analysis of the data for possible performance measurement and things like that is just beginning. So I set up this session with that caveat so that you all know that I know people are very anxiously awaiting results, but analysis is really just beginning.

So a little background on why we were doing -- why we undertook the Timeliness Monitoring Project. I think many of you were here yesterday, and you probably heard Demetrios' remarks about how critical provision of coverage determinations and appeals is in both the Medicare Advantage and Prescription Drug Program. There are a lot of regulatory

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and statutory requirements in both of those programs to ensure access to medications and services. And I know we hear a lot from the industry that, you know, so much of what you handle every day is, you know, the claims automatically go through drugs are provided at point of sale, why such an emphasis on a small percentage of our workload. And while I understand that our appeals processes are really our safety net for those rare occasions when a beneficiary didn't get the service or the medication they believe they need and this is the process that they and the avenue they can take to ensure that, you know, they have a recourse to be able to challenge a denial they believe is inappropriate.

So, additionally, you heard Demetrios say that we have continued to see compliance issues and problems in ODAG and CDAG. I think Greg may have mentioned in the last session that our audit scores are like golf scores, so lower score means better performance. And if you look at the annual report or the slides that he just showed you, ODAG tend to have the highest -- continues to have the highest score, follow by CDAG. So this is something that's been kind of an ongoing compliance issue.

Additionally, you know, I think both CMS and the industry raised concerns about the current or previous methodology of using sponsors who have been audited in a given year, and using the results of those audits to determine whether or not the data reported by the independent review entity or the IRE was complete, and that if it was not complete, that may result in a downgrade, which Alice will talk a little bit more later. So based on all of those concerns, we decided to undertake the Timeliness Monitoring Project to really get much more broad-scale data and evaluate compliance and performance across the industry.

So if you look at the goals of the project, I think they're obviously pretty closely tied to the concerns that we had, and ones that I just mentioned. Obviously this is an opportunity for us to do a much broader monitoring and compliance in ODAG and CDAG to see how sponsors are doing. It expands the current ways we're able to validate the completeness and

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accuracy of the data reported by the IRE with respect to what you are sending to the IRE. It could help us highlight potential vulnerabilities or access issues for beneficiaries.

It also gives us an opportunity, as do all of our compliance, and even audit efforts, to identify areas where our guidance, our outreach, or our educational efforts are not as clear, could be stronger, where we could be more transparent. We always get a lot of excellent feedback from all of you in anything we do, no matter whether it's putting the protocols through the Paperwork Reduction Act process or putting out memos or doing audits, you're continuously giving us feedback on our process.

We use that and we try to constantly not only feed it to subject matter experts who are writing manuals and guidance to all of you, but also to improve our audit and oversight tools. And then obviously we wanted to be able to have the data to do analysis, which Alice will talk a little bit more later, to see if there are additional ways or better ways that we could develop performance measurements for you.

So who's included? So all MA and Part D contracts, with the exception of those listed there, so Pace, Medicare- Medicaid plans, MSAs, Employer Union Direct, and 1833 Cost contracts were excluded in the TMP project.

So how do we roll it out? So initially we put out an HPMS memo on November 28th announcing our intentions to do the project, with an initial collection date starting in December. In that memo we outline the goal for the project and why we wanted to do it. We mentioned which contractors. We were using our audit contractors to do this, since we were using our audit universe record layouts to collect the data from you. We explained how to sign up for a secure file transfer program, or SFTP account. We mentioned that we were using the 2016 audit protocols because we were using 2016 audit data, and we kind of outlined the process and what steps you could expect to see followed.

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I mentioned that you guys are excellent about giving us feedback. We got a lot of it after that memo went out. I answered a lot of questions in those few days following that. So we followed up and realized maybe we weren't as clear in that memo as we thought we were and we maybe had to tell you a few other things, so we issued something on December 2nd. We delayed the collection from December to January, based on feedback. We clarified which months of data, so we were using the same enrollment bands based on your organization's total enrollment size. We told you exactly which months. So in this case February, March, and April in which month you'd be expected to submit based on your enrollment size. And the contract types that would be excluded, which are the ones I just spoke about before.

As you can see here, we had three ways of data collection for this project. Now there was two major factors that went into the development of the Wave schedule. The first was sponsors had already been identified. The sponsors that were going to be audited for 2017 had already been identified. So, first and foremost, we wanted to place those organizations in Wave one to minimize any overlap between the request for 2016 data and any request for data as part of their 2017 audit. And we were actually pretty successful in doing that. There was very few instances where -- and I mean a handful -- where any sponsor was trying to do both. And it was generally in a situation where sponsors struggled with getting us accurate data and had to do resubmissions. So that was our first goal.

The second goal in developing the Wave schedule with a lot of feedback we got was also from industry and from PBMs who said, "Please don't put all my clients in one Wave." So we took all of the PBMs and all the players in the Part D world and we looked at how many parent organizations they were servicing and how many contracts that represented of their total contracts. Now we weren't willing to split a parent org across Waves but we obviously were trying to balance the number of contracts for each PBM across Waves. So to the greatest

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extent we could, we split a PBM's work across the three Waves so that they would never be attempting to reply to data requests for all of their clients in one Wave to try and eliminate that workload.

For those of you who are like, well what about FDRs? There are so many FDRs, I'm not sure I could even begin to put my arms around that and do a schedule that way. But we did at least try to do it on the Part D side.

So you can see the dates. The first wave went out January 9th, data due on the 30th. The second went out February 10th, with data due on the 3rd, and the third and final Wave was issued on March 6th, with data due on the 24th.

Once sponsors got their engagement letter in a few days after that, they were contacted by the audit support contractor, asked if they had any questions about record layouts, talked about housekeeping, talked about process, what would happen next. And tried to answer and provide any technical assistance that they could. Once that happened, a webinar test was scheduled, or at least offered. Many of you that had already been through a program audit and knew that your firewalls would allow the webinar to go through or that you would be able to connect a declined to participate, which is fine, those sponsors, however, that had not been through an audit did undergo that just to ensure that, you know, all the technology would work once they had to have their validation webinar scheduled.

After that happened, and any of the kinks got worked out there, we would wait for data submission. Once data was submitted, the contractors would do their normal quality review. So that's really just looking over the data that's been included, looking for obvious gaps, obvious blank fields, looking for things that wouldn't make sense, like for example your decision date proceeded your request receipt date or your times were on date field, and vice versa. If that all looked okay, they'd schedule validation webinars, and, as many of you know, pick a few cases from

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each of the universes and validate that what was in the universe matched what was in your system.

If there was data that was found to be inaccurate, sponsors were requested to resubmit. There's no condition that would be assigned to universes and there was no IDS limitation like there is in audits. This is a new monitoring project. We didn't think it would be very fair to -- even though the datasets are the same, we did not think it would be appropriate to hold anyone to an IDS-type condition during the first year of this monitoring project. And then once we had everything validated we did conduct timeliness tests.

So, just quickly, what was collected or reviewed? For ODAG we had seven universes. We had the standard and expedited organization determinations. We had the claims universe, direct member reimbursements, standard and expedited pre-service reconsiderations, and then request for payment rate considerations.

For CDAG there was a total of ten universes. So we had standard and expedited coverage determinations, we had standard and expedited coverage determinations that were processed as exception requests. We had direct member reimbursement requests. We also had standard and expedited redeterminations. We had direct member reimbursement redeterminations, and then we had the standard IRE and expedited IRE auto-forward coverage determinations and redeterminations universes. So these are all the same, like I said, record layouts that were in the 2016 protocols. Sponsors were given 15 business days, the same as they are on audit, to submit the data.

So I just wanted to share with you some of the common issues or problems that we ran into during the course of the monitoring effort. They usually fell into one of four buckets. The first and probably smallest bucket was just technical issues with the webinar technology. Again, like I mentioned previously, your firewall is blocked. It's you couldn't even get

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the webinar appointment, or you couldn't join the webinar, or e-mail going to Spam mail, things like that. But that was a small portion of the things that we were able to work out. Some sponsors had trouble pulling -- didn't have trouble pulling accurate data, they had trouble pulling the data within the 15 business days due to competing priorities.

There were also multiple sponsors, as you can see, who had trouble pulling accurate data. While it was not completely limited to ODAG, it was largely an ODAG universe, and, of course, the reasons are the same as we usually hear on audit, which was FDRs. You had FDRs who may or may not have been tracking things in their systems the way of, you know, what we were asking for, as far as in the record layouts or didn't have complete data, or had trouble compiling the data.

And then finally, something that we weren't really expecting that was a little bit of an operational concern, just made things take longer, was there were multiple sponsors who did not want more than one FDR on the webinar at a time. So while we were thinking we'd be able to schedule an ODAG webinar and go through all seven universes in four hours and get that done with, it was like one call for these five cases for this FDR, and another call for this FDR. So that took a little bit of scheduling when you're going through as many sponsors as we were going through, and as many universes as we were going through, so that was a little bit of a hiccup.

But I want to just stress that this was a real -- this, even this, all four of these buckets together was a small majority. You know, me personally, as well as my colleagues, have been to a number of conferences. I see so many familiar faces, you know, in the audience, and we've said over and over again, practice. Make sure you practice with your FDRs. Make sure you practice pulling your universes. And by and large, the vast majority of you were able to get us clean accurate data, in a timely way. And that goes to the fact that you all are doing exactly what we asked you to do, so, again, bravo to all of you for doing such a good job in getting us this data in a timely fashion.



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So I did this last Friday, thinking that it would be fairly up to date. But apparently it's still not. So we've gotten even further since Friday. So Wave one there was 60 sponsors. Now that line is still accurate. 60 of the 60 have completed their universe submissions. There is one last that is still undergoing validation, and once they are complete, their timeliness test also be run. Wave two, there was 54 sponsors. All of them have gone through all three of the processes, all three of the steps. They're completely done. And Wave three is now completely done. There was 42 sponsors in Wave three. They have all had their universes submitted. They're validated, and their timeliness tests were completed. So we are now 155 out of the 156 that went through the Wave, so about 99% are complete.

Of the 2016 audited sponsors, there were 27 of those. Now if you had data submitted during your 2016 program audit, we did not require you to resubmit your data. We used your audit data, with very few exceptions. If you had a universe where you received an invalid data submission condition, so you didn't ever get us a clean audit universe, you had to resubmit those universes, but that was it.

So I know also some of you asked, well, I had a 2015 audit and I'm validated. I'm going through independent validation in 2016, why can't I use that data? Well, by and large, that data went to an independent validator, one; and, two, we never knew how many universes you might be submitting as part of validation, and it probably wasn't the complete set that we were requesting as part of TMP, so we couldn't allow people who were undergoing independent validation to just use that dataset unfortunately. But at least those sponsors audited in 2016 were spared from having to resubmit, and all of them are completely through the process. So 182 out of the 183 in total that went through the process are through it. So it's about 99.5%.

So with that, that's kind of how we operationalized the monitoring project. I'll hand it over to Alice to talk about application of the data.



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Alice Lee-Martin: And the clicker. Thank you, Jen. My name is Alice Lee-Martin, and I'm in the Medicare Drug Benefit Group. A lot of our team's work supports the Star rating. So I think I want to definitely start off with a thank you to everyone who has helped us. As Jen mentioned, this is a brand new monitoring project. It kicked off rather quickly and very successful, I think, for the first year. I also want to thank Jen, all of her team's work and support, all contractors work. I think it's been a great collaboration with our two groups.

So I'm going to start off with this slide, which lays out some of the potential applications for these results. Again, this being our first year, we truly understand this may be more of a year of where we learn lessons together about how things can be improved, and also think about the future before we draw any conclusions.

So, first off, we are hoping the TMP results can help inform some of the audit protocols and workflow. We may find that there will be additional clarification needed; for example, the record layouts. Of course, the large broader hope is that we can study comprehensively all sponsors in their appeals processing, and if there are contract-level differences, that we can detect that, versus just at a sponsor level. This could lead to having, for CMS, new areas of concern for monitoring and oversight, or we may also issue new guidance for sponsors about some of those new areas that we're seeing. And then lastly, the TMP results could lead to having a new method for us to validate the IRE data independent review entity data, used for star ratings, and specifically for four appeals measures, which I'll talk about in a minute.

We're hoping, if the TMP results -- again, based on this first year and in the future -- could provide us a statistical basis where we could have scaled reductions. Right now we have our current policy, which is a standard change, if there is a data concern, down to one Star. So, again, we're hopeful that this might be something we can pursue in the future.

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So the next two slides touch on the Star ratings, and obviously I could probably have a separate presentation about that. But just briefly, and to really show everyone the need to have accurate data for the ratings. The Star Ratings, as everyone knows, measure both the quality of and the experiences of beneficiaries that enrolled in MA or PDP. The Star Ratings assist beneficiaries in finding the best plan, and the Ratings are the basis for MA quality bonus payments. So obviously we have financial and marketing incentives, and we must have safeguards to know that the Star ratings are accurate, are valid, and prevent from us having ratings that are actually falsely inflating performance, or, worse off, masking some deficiencies.

So I mentioned that we have four appeals measures in the star ratings. There's two measures for Part C and two for Part D. These appeals measures have been part of the Star ratings from the very beginning. They are very important indicators of beneficiary access to their services and their prescription drugs that they need. The measures are entirely based on the data that are reported to the IRE through the normal course of business, from Part C and D sponsors to the IRE.

And I mentioned a few slides back, our long-standing current policy is that we would assign one star if we find that a contract's processing or reporting has resulted in incomplete or biased data. This is necessary, because at that point we cannot objectively measure or rate a sponsor's performance in that area. This policy prevents us from falsely assigning high stars. And, in general, it protects the validity of the Star Ratings. I just mentioned all the ways the Star ratings can impact beneficiary choice and quality bonus payments.

So knowing that the IRE data are the source of these measures, you all understand, of course, that the IRE data are directly impacted if a sponsor is non-compliant to our requirements. Specifically we have seen causes ranging from a lack of knowledge of the requirements, poor training, erroneous systems that aren't processing or tracking things correctly, or

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deliberate attempts to bias the data to achieve higher Star Ratings. In the various call letter discussions that we've had, I would say that the industry supports us in having these appeals measures, and supports us, of course, making the effort to make sure we have the accurate data used for these measures.

So this diagram is currently the methods to validate the appeals processes that can impact the IRE data. When we're talking about the appeals process and understanding that the IRE data are truly downstream results of processes following CMS requirements, what we're doing here is looking for the appeals processes to be confirmed as compliant. We're looking to see if there have been systemic errors in a sponsor's process that would, again, affect the downstream IRE data, or cause the IRE data to not be a real reflection of their performance. For example, systemic issues can be found from the Regional offices identifying an issue, working with Central office, and then issuing a notice of noncompliance. That's one way that we would review and detect if there's any issues that we would be concerned about the IRE data.

All contracts are reviewed, and we identify potential outliers. Those potential outliers are then selected for targeted reviews. And, again, we're looking to see if there are systemic errors in their processing down to the IRE data. We would look at information that is collected through the audits. Again, these are findings, and not -- I want to emphasize specifically, not audit scores from the ODAG section or the CDAG sections, and not audit related enforcement actions. It's actually the information gathered through a full program audit. We would review that information and determine if any of that information points to a processing error or deficiency that, again, affects the IRE data. And then lastly, of course, we have the potential for TMP results to be a fourth method that we can validate the IRE data.

So I think this slide is a good overview of what we had announced in the final call letter as next steps. In the final call letter we committed to

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reviewing the first year of the TMP results and really looking to see what we can conclude from them and perhaps use, again, in that data review for the appeals measures. So some of these questions here are initial questions.

First off, are the results accurate and valid at the contract level? As you know, usually, the universes are drawn at the sponsor level. The Star ratings are at the contract level. So what we will be doing is taking all of the analyses, all of the data that have been collected so far and looking to see, at the contract level, if we can still make that same conclusion. We're interested to see if there are similarities between what we're finding with the TMP results with this other method that I mentioned, about looking at things like notices of noncompliance or targeted reviews to see if there are similarities and whether or not the TMP results may help replace some of those in the future. And then lastly, is there an objective basis that we could implement a scaled reduction? So instead of downgrading a contract's measure to one star, would we be able to have thresholds, basically a threshold for errors, to then make scaled reductions instead.

In the final call letter we indicated that we are very open to input about our work with the TMP results, as well as validating the IRE data as a whole. And also that we welcome new ideas for how else we could use the TMP results. You know, certainly it's not just for the Star Ratings. Hopefully we'll see, again, a new way of comprehensively looking at all sponsors. For the Star ratings team, of course, we are always looking for the appeals measures to be expanded for other areas of concern. Right now we have, again, two Part C and two Part D measures, and we would like to have more concepts or ideas for the future.

And in closing, we've listed here two mailboxes for any questions. If you don't ask us today, there is a mailbox listed for questions related to submitting the TMP data or the second mailbox for any questions or ideas you have about how we could use the TMP results.

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Stacey Plizga: Okay, if we have any questions from our in-house audience, please step up to the microphone in the center aisle. And we do have a question.

Linda Howard: Linda Howard from Alternative. You kind of touched on a question I had, which was around thresholds. So what is the standard now in terms if there is an audit that there is a determination that issues were not being properly tracked and, therefore, not being forwarded to the IRE? How much is enough to get you a number one star rating?

Alice Lee-Martin: So thank you for your question. I think that this -- I can answer in broad sense. Again, we're looking for systemic errors. In the past I would say it's difficult to give you a specific threshold, because it really -- and, again, I don't want to put anyone on the spot in terms of past experiences that we've seen. But if there's evidence, say, of a lack of knowledge, and the lack of knowledge was a root cause for 50 cases misprocessed, but we know that the issue was not identified until the ninth month of a measurement year, then we can conclude that the entire measurement year was also affected by that lack of knowledge. Does that make sense? So it's really what are we finding as the cause of the deficiencies in the process, where are things falling through cracks, and then knowing that, well, that might be why we only have ten cases that made it to the IRE for example, just as an example. Not a real number. But does that make sense?

Linda Howard: It does. Thank you.

Michael Sneckenberger: Good afternoon. Mike Sneckenberger: from Anthem. And the question I have, recognizing the qualifier at the beginning, but can or will CMS be able to kind of share overall observations from the initial TMP of how performance was conducted, or just anything from it at some point?

Alice Lee-Martin: I certainly believe we will be able to share. You're asking more from a broad sense how --

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Michael Sneckenberger: Yeah. Like how things --

Alice Lee-Martin: -- the Part C and D program overall. I'm sure we will be able to this summer. I think the pressure that we're all feeling is taking that sponsor level to contract.

Michael Sneckenberger: Okay.

Alice Lee-Martin: And everyone is probably most interested in that in terms of the Star ratings and their next steps. I think definitely that would be a piece that we would want to share.

Michael Sneckenberger: Okay. Thank you.

Britton Whitbeck: Hey, good afternoon. Britton Whitbeck from Lumeris. Is there any possibility, based on the results of the timeliness monitoring, that either there would be a bonus award on the cut rates for people who provide accurate data or that the cut rates themselves may be reduced based on reality of average plan performance?

Alice Lee-Martin: So I think I understood your first part. Would there be a future Star rating measure that looks at the ability to go through the TMP, basically TMP project, accurately and with success? Is that your question?

Britton Whitbeck: Or I guess it's based on the results of the monitoring, whether the data that's being collected from the IRE is accurate based on what the plan is, just like in the monitoring project.

Alice Lee-Martin: You know, I think it's probably too soon to tell, and I think that would be a great idea -- please issue an e-mail to us to the mailbox to give us that.

Britton Whitbeck: Okay.

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Alice Lee-Martin: Because we are looking for those ideas. I think the normal call letter process would be to collect those ideas and get more public feedback. And then, as you know, most Star Rating changes are, like, one to two years in the making. So we could certainly see that, potentially, as a display measure, you know, and see the feedback.

Britton Whitbeck: And as we kind of look at plan performance with IRE auto [inaudible] on the fairness measures from IRE, are there any plans to evaluate consistency among IRE decisions?

Alice Lee-Martin: That's certainly an area separate from anything here with the TMP that we want to do, yes, absolutely.

Britton Whitbeck: Okay.

Alice Lee-Martin: Thank you.

Britton Whitbeck: Thank you.

Andria Simckes: Hi. Andria Simckes from Lumeris. Will the program audit consistency team evaluate the TMP evidence in order to ensure consistency in the evaluation?

Jennifer Smith: No. There won't be any conditions cited because it's not an audit. It's just a monitoring project. And, really, we have data templates that are run. Now, granted, as Alice pointed out, our summary templates put an output at the parent organization level. So they'll combine all of the results across contracts and give you a timeliness percentage for each of those universes at a parent org level. We've also provided them with the source data, and what they'll be working to do is actually break that down and get timeliness percentages at a contract level, so they have all of the data. But because no conditions are being cited and this a formula comparing data cells, there won't be any PAC review.



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Andria Simckes: Thank you.

Stacey Plizga: All right. We will jump to some of the questions we received from our virtual audience. And the first one is, "Please clarify whether the monitoring exercise will always take place at the same time of the year and that the same methodology from 2017 will be applied."

Jennifer Smith: I'll go ahead and take that, I think. I think it will be done the same time of the year, particularly if there is an application for Star ratings. I know my colleagues need that data analysis, and they need it completed by early May. So the timeframe for collection would be the same. I can't say that since we are retrospectively collecting data from the previous year that we will always collect February, March, and April. That would probably be subject to change. But the timeframe for collection will stay the same.

Stacey Plizga: Okay. How and when will results be released? Will sponsors receive individual results or de-identified results for all plans?

Alice Lee-Martin: I think that one is mine. So, again, as we're completing the analyses I think I'll have more information soon about our announcement of results. I do agree with the one person here who asked about the program broad summary information. Certainly that's what we would want to share. In general, and, again, this is our first year, I mentioned about lessons learned versus true conclusions perhaps this time, but if we have a data integrity concern, typically what we've been doing is notifying a contractor during the summer, in line with the plan preview for the coming Star ratings. So I would, again, just my guess, I think the first plan preview will be July of this year, coming up for 2018 stars. I would expect that it would be in the June/July timeframe: But, again, my best guess.

Stacey Plizga: Okay. The next question, or statement, I guess, "We encourage CMS to share more information about this process, as we have sent questions to the audit inbox but not received a response. In particular, we are

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interested in learning timeliness for monitoring results, how the results will affect star ratings and CMS's plans for this initiative in 2018."

Jennifer Smith: So I apologize for anybody who submitted a question and didn't get a response. We monitor that pretty closely. I'm not aware of any unanswered questions. But please feel free to resubmit it or send it directly to me, JenniferSmith@cms.hhs.gov, and I'll get you an answer. Hopefully our presentation gave you a little bit more information about the process and the potential analysis that we're planning on doing, as well as releasing any results later on, as Alice mentioned.

Stacey Plizga: Okay. "When will the results of the ODAG/CDAG timeliness monitor be released?"

Jennifer Smith: I think we answered that question.

Stacey Plizga: Okay. "How does CMS score the results with regards to receiving failed compliant letters?"

Jennifer Smith: I'm not entirely sure what the individual means, but we aren't collecting -- if you mean decision letters, we aren't collecting decision letters as part of the monitoring project, nor are we evaluating the content of the letters. So that's not being looked at. I apologize if that's not the crux of your question, but please send it to the audit mailbox if it was a different question.

Stacey Plizga: Okay. And then the last one and it's part of the same question, "Would the score impact the star rating?"

Jennifer Smith: Again, I think if they're talking about an audit score, these are not audits. This is a monitoring project. We are not assigning or assessing audit conditions and you're not getting an audit score. I think there will be some, obviously, analysis of your timeliness, and that may feed into Star

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ratings. But, you know, that's, I think, to be determined based on what we see, based on our analysis.

Alice Lee-Martin: And let me just add on. Again, when we were mentioning on the slide that showed the current methods of validating the appeals process and whether or not the IRE data were adversely affected by any deficiencies, and remember I mentioned we do not use just the simple ODAG or CDAG score to indicate, aha, there was a problem with the data. It is truly looking at the information that's found during the audit separate from the actual audit scores.

Stacey Plizga: Okay. If that's all the questions that we have for now, then I would like to thank Jen and Alice for the discussion for the Timeliness Monitoring Project. To evaluate session five go ahead and take out those phones and select A.

Next up is a break, and our afternoon break. And we are scheduled to restart at 3 o'clock p.m., so please get up and stretch and then be back at 3:00 o'clock p.m. for the Civil Money Penalty Methodology. Thank you.

[BREAK].

Stacey Plizga: Welcome back everyone. And welcome back to those who are viewing today. Thank you everyone for being back and on time. Just a couple reminders, if you are part of our virtual audience, to send in any questions you may have for the speakers via the SurveyMonkey link, the Ask CMS Live, and we will make sure to get those to the presenters. If you would like to provide feedback on today's event, a link to the event survey will be e-mailed to you at the completion of the conference. Please consider taking a few minutes to complete the survey.

This conference will be evaluated for continuing education credits by CMS, and we'll give credit for approximately six hours of training, and the final number will be determined after the completion of the event. And this

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conference has also been approved for CCB -- approved by CCB for continuing education credits, and participants will have the opportunity to earn up to 5.7 credits for this conference. So lots of opportunities for credits.

Our last presentation today will provide participants with an introduction to the civil money penalty, CMP, methodology that CMS uses to calculate penalties for certain program violations of Medicare Advantage organizations and prescription drug plans. From the division of Compliance and Enforcement we have Kevin Stansbury.