

DEPARTMENT OF HEALTH & HUMAN SERVICES  
Centers for Medicare & Medicaid Services  
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## **MEDICARE PLAN PAYMENT GROUP**

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**Date:** January 27, 2016

**To:** All Medicare Advantage, Cost, PACE, and Demonstration Organizations

**From:** Cheri Rice, Director  
Medicare Plan Payment Group

**Subject:** **Risk Adjustment Processing System (RAPS) Diagnosis Cluster Edit - 410 Error Code**

On January 1, 2016, CMS implemented a change to the diagnosis cluster 410 error code edit in RAPS. This revision prevents plans from submitting diagnoses for beneficiaries who are not members of that plan on the date of service linked to the diagnoses. Previously, the 410 error code only prevented plans from submitting diagnoses for beneficiaries who were not members of any plan on the date of service linked to the diagnoses.

CMS has analyzed the impact of the revision to the 410 error code edit on plan submission of RAPS diagnoses clusters for 2014 dates of service and has decided to suspend implementation of this change. CMS will revert back to the previous version of the 410 error code edit on or about February 8, 2016 so that the error code will only be issued when a beneficiary is not enrolled in any plan on the date of service for the diagnoses in question. CMS is aware of the operational challenge that this change may have had on plans' abilities to submit all 2014 RAPS clusters in advance of the approaching February 1, 2016 deadline for Payment Year (PY) 2015. Accordingly, CMS will allow for a three week extension to the February 1<sup>st</sup> deadline. Specifically, plans will now have until Monday, February 22, 2016 to submit all RAPS clusters that would be included in the PY 2015 reconciliation payment run.

Plans are to begin resubmitting transactions for which they have received the 410 error code after February 8, 2016, so that these specific transactions can be included in the PY2015 Final run.

Questions regarding the change to the 410 error code may be sent to [riskadjustment@cms.hhs.gov](mailto:riskadjustment@cms.hhs.gov).