

DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
7500 Security Boulevard
Baltimore, Maryland 21244-1850



**CENTER FOR MEDICARE
MEDICARE PLAN PAYMENT GROUP**

TO: All Medicare Advantage Organizations, PACE Organizations, Medicare-Medicaid Plans, Section 1833 Cost Contractors and Section 1876 Cost Contractors, and Demonstrations

FROM: Cheri Rice, Director
Medicare Plan Payment Group

SUBJECT: 2016 Risk Score Reruns For Purposes of Payment Recovery

DATE: November 19, 2015

Per the overpayment regulation 42 CFR §422.326, all MA Organizations are required to report and return overpayments as required by the Affordable Care Act. The purpose of this memo is to notify all MA Organizations of the payment years for which CMS intends to rerun risk scores during calendar year 2016. Reruns will be completed for the following prior payment years:

Payment Year	Dates of Service
2010	2009
2011	2010
2012	2011
2013	2012
2014	2013

We will notify MA Organizations at least 30 days in advance of the deadline for submitting deletes for each data run. CMS will incorporate deletes submitted for a prior payment year as of the deadline. MA Organizations should look to the monthly payment letters to determine when adjustments will be applied to payments.

For questions relating to this memo, please email riskadjustment@cms.hhs.gov and specify “HPMS memo- 2016 Risk Score Reruns For Purposes of Payment Recovery” in the subject line.