



2012 Regional Technical Assistance Report Reconciliation Boot Camp Workbook



Thursday, August 9, 2012

Payment



REPORT RECONCILIATION BOOT CAMP – WORKBOOK EXERCISES

MODULE 2 – REPORT RECONCILIATION BOOT CAMP – WORKBOOK EXERCISES

The Workbook contains three components, the Exercises, Reports, and Answer Key for future reference.

Rainbow Health is an MAPD. They want to verify the payment for three (3) of their beneficiaries on the Monthly Membership Report (MMR) by calculating the Part C and D Payments. The MMR is located on pages WR-1 through WR-3.

The calculation involves five (5) steps. To complete this exercise, identify the payment amount for Part A, B, and D including determining what rebates or MSP reduction are applicable, if any, to the calculations. They populate the worksheets and sum the amounts (and subtract the MSP reduction if applicable) to determine the totals. For any components that are not applicable to the payment, they enter zero (0) on the line.

For the purposes of mapping the payment components, the MMR fields are identified on the worksheets and over the field descriptions on the MMR in the Workbook Reports.

Exercise 1

Beneficiary 1: R. Red (prospective record)

Calculating the Part C Payment from the MMR

Step 1: Calculate Part A Payment

<u>Payment Calculation Amount for Part A</u>	<u>MMR Field #</u>		
Risk Adjuster Payment/Adjustment Amount Part A	33		_____
MSP Reduction/Reduction Adjustment Amount	83	-	_____
Rebate for Part A Cost Sharing Reduction	56	+	_____
Rebate for Other Part A Mandatory Supplemental Benefits	58	+	_____
Part D Supplemental Benefits Part A Amount	62	+	_____
Total Part A Payment		=	_____

Step 2: Calculate Part B Payment

<u>Payment Calculation Amount for Part B</u>	<u>MMR Field #</u>		
Risk Adjuster Payment/Adjustment Amount Part B	34		_____
MSP Reduction/Reduction Adjustment Amount	84	-	_____
Rebate for Part B Cost Sharing Reduction	57	+	_____
Rebate for Other Part B Mandatory Supplemental Benefits	59	+	_____
Part D Supplemental Benefits Part B Amount	63	+	_____
Total Part B Payment		=	_____



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Step 3: Calculate Total MA Payment

To obtain the Total MA Payment for the beneficiary, Rainbow Health will add the total amounts from Steps 1 and 2.

Total MA Payment Calculation Amount	Step		
Total Part A Payment	1		
Total Part B Payment	2	+	
Total MA Payment		=	

Step 4: Calculate Part D Payment

For the Part D calculation, LIPS is included in the Total Part D Amount reported on the MMR, but is not included in the prospective or adjustment amounts on the Plan Payment Report Table 1. LIPS is reconciled separately for Table 2.

Payment Calculation Amount for Part D	MMR Field #		
Low Income Premium Subsidy (LIPS)	35		
MA Rebate for Part D Basic Premium Reduction	72	+	
Part D Direct Subsidy Amount	74	+	
Reinsurance Subsidy Amount	75	+	
Low-Income Subsidy Payment Amount	76	+	
Coverage Gap Discount Amount	86	+	
Total Part D Payment		=	

Step 5: Calculating the Total Payment

To obtain the final payment for the beneficiary, Rainbow Health will add total amounts from Steps 3 and 4.

	Step		
Total MA Payment	3		
Total Part D Payment	4	+	
Total MA-PD Payment		=	

Note: There is also an adjusted record on the MMR for this beneficiary for a retroactive enrollment, which shows the same values for payment amounts retroactive to March 2012. The same calculations would be completed for the adjusted record as the prospective record.



REPORT RECONCILIATION BOOT CAMP – WORKBOOK EXERCISES

Beneficiary 2: Y. Yellow (prospective record)

Calculating the Part C Payment from the MMR

Step 1: Calculate Part A Payment

Payment Calculation Amount for Part A	MMR Field #	
Risk Adjuster Payment/Adjustment Amount Part A	33	_____
MSP Reduction/Reduction Adjustment Amount	83	- _____
Rebate for Part A Cost Sharing Reduction	56	+ _____
Rebate for Other Part A Mandatory Supplemental Benefits	58	+ _____
Part D Supplemental Benefits Part A Amount	62	+ _____
Total Part A Payment		= _____

Step 2: Calculate Part B Payment

Payment Calculation Amount for Part B	MMR Field #	
Risk Adjuster Payment/Adjustment Amount Part B	34	_____
MSP Reduction/Reduction Adjustment Amount	84	- _____
Rebate for Part B Cost Sharing Reduction	57	+ _____
Rebate for Other Part B Mandatory Supplemental Benefits	59	+ _____
Part D Supplemental Benefits Part B Amount	63	+ _____
Total Part B Payment		= _____

Step 3: Calculate Total MA Payment

To obtain the Total MA Payment for the beneficiary, Rainbow Health will add the total amounts from Steps 1 and 2.

Total MA Payment Calculation Amount	Step	
Total Part A Payment	1	_____
Total Part B Payment	2	+ _____
Total MA Payment		= _____



REPORT RECONCILIATION BOOT CAMP – WORKBOOK EXERCISES

Step 4: Calculate Part D Payment

For the Part D calculation, LIPS is included in the Total Part D Amount reported on the MMR, but is not included in the prospective or adjustment amounts on the Plan Payment Report Table 1. LIPS is reconciled separately for Table 2.

Payment Calculation Amount for Part D	MMR Field #		
Low Income Premium Subsidy (LIPS)	35		_____
MA Rebate for Part D Basic Premium Reduction	72	+	_____
Part D Direct Subsidy Amount	74	+	_____
Reinsurance Subsidy Amount	75	+	_____
Low-Income Subsidy Payment Amount	76	+	_____
Coverage Gap Discount Amount	86	+	_____
Total Part D Payment		=	_____

Step 5: Calculating the Total Payment

To obtain the final payment for the beneficiary, Rainbow Health will add total amounts from Steps 3 and 4.

	Step		
Total MA Payment	3		_____
Total Part D Payment	4	+	_____
Total MA-PD Payment		=	_____

Note: There is also an adjusted record on the MMR for this beneficiary for a retroactive enrollment, which shows the same values for payment amounts retroactive to March 2012. The same calculations would be completed for the adjusted record as the prospective record.



REPORT RECONCILIATION BOOT CAMP – WORKBOOK EXERCISES

Beneficiary 3: I. Indigo

Calculating the Part C Payment from the MMR

Step 1: Calculate Part A Payment

<u>Payment Calculation Amount for Part A</u>	<u>MMR Field #</u>		
Risk Adjuster Payment/Adjustment Amount Part A	33		_____
MSP Reduction/Reduction Adjustment Amount	83	-	_____
Rebate for Part A Cost Sharing Reduction	56	+	_____
Rebate for Other Part A Mandatory Supplemental Benefits	58	+	_____
Part D Supplemental Benefits Part A Amount	62	+	_____
Total Part A Payment		=	_____

Step 2: Calculate Part B Payment

<u>Payment Calculation Amount for Part B</u>	<u>MMR Field #</u>		
Risk Adjuster Payment/Adjustment Amount Part B	34		_____
MSP Reduction/Reduction Adjustment Amount	84	-	_____
Rebate for Part B Cost Sharing Reduction	57	+	_____
Rebate for Other Part B Mandatory Supplemental Benefits	59	+	_____
Part D Supplemental Benefits Part B Amount	63	+	_____
Total Part B Payment		=	_____

Step 3: Calculate Total MA Payment

To obtain the Total MA Payment for the beneficiary, Rainbow Health will add the total amounts from Steps 1 and 2.

<u>Total MA Payment Calculation Amount</u>	<u>Step</u>		
Total Part A Payment	1		_____
Total Part B Payment	2	+	_____
Total MA Payment			_____



REPORT RECONCILIATION BOOT CAMP – WORKBOOK EXERCISES

Step 4: Calculate Part D Payment

For the Part D calculation, LIPS is included in the Total Part D Amount reported on the MMR, but is not included in the prospective or adjustment amounts on the Plan Payment Report Table 1. LIPS is reconciled separately for Table 2.

Payment Calculation Amount for Part D	MMR Field #		
Low Income Premium Subsidy (LIPS)	35		_____
MA Rebate for Part D Basic Premium Reduction	72	+	_____
Part D Direct Subsidy Amount	74	+	_____
Reinsurance Subsidy Amount	75	+	_____
Low-Income Subsidy Payment Amount	76	+	_____
Coverage Gap Discount Amount	86	+	_____
Total Part D Payment		=	_____

Step 5: Calculating the Total Payment

To obtain the final payment for the beneficiary, Rainbow Health will add all total amounts from Steps 3 and 4.

	Step		
Total MA Payment	3		_____
Total Part D Payment	4	+	_____
Total MA-PD Payment		=	_____



REPORT RECONCILIATION BOOT CAMP – WORKBOOK EXERCISES

Exercise 2

Now that Rainbow Health has verified the payments for the three (3) beneficiaries, they are ready to reconcile the monthly reports. To reconcile the MMR, the plan will sum the prospective records and verify the amounts with the amounts at the top of PPR Table 1. They will also sum the adjustment records by Adjustment Reason Code (ARC) and compare the amounts to PPR Table 1. The MMR is in the Workbook Reports pages WR-1 through WR-3 and PPR Table 1 is on page WR-5.

Reconciling MMR with PPR Table 1 – Prospective Records

Calculate Part A Prospective Payment

Payment Calculation Amount for Part A	MMR Field #		
Risk Adjuster Payment/Adjustment Amount Part A	33		_____
MSP Reduction/Reduction Adjustment Amount	83	-	_____
Rebate for Part A Cost Sharing Reduction	56	+	_____
Rebate for Other Part A Mandatory Supplemental Benefits	58	+	_____
Part D Supplemental Benefits Part A Amount	62	+	_____
Total Part A Payment		=	_____

Calculate Part B Prospective Payment

Payment Calculation Amount for Part B	MMR Field #		
Risk Adjuster Payment/Adjustment Amount Part B	34		_____
MSP Reduction/Reduction Adjustment Amount	84	-	_____
Rebate for Part B Cost Sharing Reduction	57	+	_____
Rebate for Other Part B Mandatory Supplemental Benefits	59	+	_____
Part D Supplemental Benefits Part B Amount	63	+	_____
Total Part B Payment		=	_____

Calculate Part D Prospective Payment – LIPS is not included in the Part D Prospective Payment and is therefore not included in the worksheet below. LIPS will be reconciled separately for PPR Table 2.

Payment Calculation Amount for Part D	MMR Field #		
MA Rebate for Part D Basic Premium Reduction	72		_____
Part D Direct Subsidy Amount	74	+	_____
Reinsurance Subsidy Amount	75	+	_____
Low-Income Subsidy Payment Amount	76	+	_____
Coverage Gap Discount Amount	86	+	_____
Total Part D Payment		=	_____



REPORT RECONCILIATION BOOT CAMP – WORKBOOK EXERCISES

Reconciling MMR with PPR Table 1 – Adjustment Records

Calculate Part A Adjustment Payments

Payment Calculation Amount for Part A	MMR Field #	ARC 02	ARC 03
Risk Adjuster Payment/Adjustment Amount Part A	33	_____	_____
MSP Reduction/Reduction Adjustment Amount	83	- _____	- _____
Rebate for Part A Cost Sharing Reduction	56	+ _____	+ _____
Rebate for Other Part A Mandatory Supplemental Benefits	58	+ _____	+ _____
Part D Supplemental Benefits Part A Amount	62	+ _____	+ _____
Total Part A Adjustment Payment Amounts		= _____	= _____

Calculate Part B Adjustment Payment

Payment Calculation Amount for Part B	MMR Field #	ARC 02	ARC 03
Risk Adjuster Payment/Adjustment Amount Part B	34	_____	_____
MSP Reduction/Reduction Adjustment Amount	84	- _____	- _____
Rebate for Part B Cost Sharing Reduction	57	+ _____	+ _____
Rebate for Other Part B Mandatory Supplemental Benefits	59	+ _____	+ _____
Part D Supplemental Benefits Part B Amount	63	+ _____	+ _____
Total Part B Adjustment Payment Amounts		= _____	= _____

Calculate Part D Adjustment Payment

Payment Calculation Amount for Part D	MMR Field #	ARC 02	ARC 03
MA Rebate for Part D Basic Premium Reduction	72	_____	_____
Part D Direct Subsidy Amount	74	+ _____	+ _____
Reinsurance Subsidy Amount	75	+ _____	+ _____
Low-Income Subsidy Payment Amount	76	+ _____	+ _____
Coverage Gap Discount Amount	86	+ _____	+ _____
Total Part D Adjustment Payment Amounts		= _____	= _____



REPORT RECONCILIATION BOOT CAMP – WORKBOOK EXERCISES

Next, Rainbow Health will reconcile the MMR, LIS/LEP report, and the MWPR with PPR Table 2. The MMR is on page WR-1, the LIS/LEP and MWPR Reports are on page WR-4, and PPR Table 2 is on page WR-6. Rainbow Health will check the calculations of the User Fees on PPR Table 3 on page WR-7 and check for any Special Adjustments on PPR Table 4 on page WR-8. Lastly, Rainbow Health will review PPR Table 5 on page WR-9 to confirm the values carried over correctly from Tables 1-4 and check for any prior month amounts or amounts going forward.

Reconciling MMR with PPR Table 2

Description of Field	MMR Field #	
Low Income Premium Subsidy (LIPS)*	35	= _____

*Note: The MMR is the primary source for LIPS on Table 2 of the PPR. However, the Premium LIS Amount in Field 17 on the Low Income Subsidy (LIS)/Late Enrollment Penalty (LEP) Report should match the LIPS amount on the MMR.

Reconciling Low Income Subsidy (LIS)/Late Enrollment Penalty (LEP) Report with PPR Table 2

Description of Field	LIS/LEP Field #	
Net LEP Amount for Direct Billed Members	18	= _____

Reconciling Monthly Premium Withhold Report (MPWR) with PPR Table 2

Description of Field	MPWR Field #	
Part C Premiums Collected	15	= _____
Part D Premiums Collected	16	= _____

PPR Table 3*

	Prospective Amount	Fee Rate	
Education User Fee			
Part A Prospective Amount	_____	0.00048	= _____
Part B Prospective Amount	_____	0.00048	= _____
Part D Prospective Amount	_____	0.00048	= _____
COB User Fee			
Part D Member Count	_____	0.18	= _____

*Note that fees are negative as they are deducted from a plan's payment.

PPR Table 4

Table 4 provides the Special Adjustment Payments, if any, that are applicable for the month.

PPR Table 5 (refer to page WR-9)

Table 5 provides a summary of the payments from Tables 1, 2, 3, and 4. In addition, if there are payments carried over from the previous month, they will appear on this table as will any payments to carry forward to the next payment month.



REPORT RECONCILIATION BOOT CAMP – WORKBOOK REPORTS

MODULE 2 – REPORT RECONCILIATION BOOT CAMP – WORKBOOK REPORTS

Figure 2A – Monthly Membership Report Data File - Detail Record

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20
MCO Contract Number	Run Date of the File	Payment Date	HIC Number	Surname	First Initial	Sex	DOB	Age Group	SCC	OOA	Part A Entitl	Part B Entitl	Hospice	ESRD	Aged/Disabled MSP	Inst	NHC	New Medicare Beneficiary Medicaid Status Flag	LTI Flag
H9999	20120317	201204	XXXXXXXX1A	Red	R	F	xxxxxxx	7074	36580		Y	Y			N				
H9999	20120317	201204	XXXXXXXX1A	Red	R	F	xxxxxxx	7074	36580		Y	Y			N				
H9999	20120317	201204	XXXXXXXX2A	Orange	O	F	xxxxxxx	4554	36600		Y	Y			N				
H9999	20120317	201204	XXXXXXXX3B	Yellow	Y	F	xxxxxxx	7074	36580		Y	Y			N				
H9999	20120317	201204	XXXXXXXX3B	Yellow	Y	F	xxxxxxx	7074	36580		Y	Y			N				
H9999	20120317	201204	XXXXXXXX4A	Green	G	F	xxxxxxx	7074	36250		Y	Y			N				
H9999	20120317	201204	XXXXXXXX5A	Blue	B	M	xxxxxxx	6569	36250		Y	Y			N				
H9999	20120317	201204	XXXXXXXX6A	Indigo	I	F	xxxxxxx	6064	36120		Y	Y			Y				
H9999	20120317	201204	XXXXXXXX7A	Violet	V	F	xxxxxxx	6569	36250		Y	Y			N				
H9999	20120317	201204	XXXXXXXX8D	Sky	B	F	xxxxxxx	7074	36660		Y	Y			N				

21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37		
Surname	First Initial	Medicaid Indicator	PIP-DCG	Default Risk Factor Code	Risk Adjuster Factor A	Risk Adjuster Factor B	Number Pymt/ Adjust Months Part A	Number Pymt/ Adjust Months Part B	ARC	Pymt/ Adjust/ MSA Start Date	Pymt/ Adjust/ MSA End Date	Demo Pymt/ Adjust Amt A	Demo Pymt/ Adjust Amt B	Monthly Pymt/ Adjust Amt A	Monthly Pymt/ Adjust Amt B	LIPS	ESRD MSP Flag	MSA Part A Deposit/ Recovery Amount
Red	R	Y			0.918	0.918	1	1		20120401	20120430	0	0	329.68	297.91	18.00		0
Red	R	Y			0.918	0.918	1	1	2	20120301	20120331	0	0	329.68	297.91	18.00		0
Orange	O				0.782	0.782	1	1		20120401	20120430	0	0	275.22	248.68	0.00		0
Yellow	Y	Y			0.821	0.821	1	1		20120401	20120430	0	0	310.13	280.24	26.20		0
Yellow	Y	Y			0.821	0.821	1	1	2	20120301	20120331	0	0	310.13	280.24	26.20		0
Green	G				0.687	0.687	1	1		20120401	20120430	0	0	248.25	224.32	0.00		0
Blue	B	Y			2.170	2.170	1	1	3	20120301	20120331	0	0	-784.13	-708.55	-18.00		0
Indigo	I				0.368	0.368	1	1		20120401	20120430	0	0	133.25	120.40	0.00		0
Violet	V	Y			1.664	1.664	1	1		20120401	20120430	0	0	601.29	543.33	18.00		0
Sky	B				0.474	0.474	1	1		20120401	20120430	0	0	170.87	154.40	0.00		0



REPORT RECONCILIATION BOOT CAMP – WORKBOOK REPORTS

	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	
Surname	First Initial	MSA Part B Deposit/ Recovery Amount	MSA Deposit/ Recovery Months	Current Medicaid Status	Risk Adjuster Age Group (RAAG)	Previous Disable Ratio (PRDIB)	De Minimis	Beneficiary Dual and Part D Enrollment Status Flag	PBP ID	Race Code	RAFT Code	Frailty Indic	OREC	Lag Indicator	Seg ID	Enrollment Source	EGHP Flag
Red	R	0	0	1	7074		N	1	001	2	C	N	0	Y	0	B	
Red	R	0	0		7074	0	N	1	001	2	C	N	0	Y	0	B	
Orange	O	0	0	0	4554		N	1	001	1	C	N	1	Y	0	B	
Yellow	Y	0	0	1	7074		N	1	004	2	C	N	0	Y	0	B	
Yellow	Y	0	0		7074	0	N	1	004	2	C	N	0	Y	0	B	
Green	G	0	0	0	7074		N	1	001	2	C	N	0	Y	0	B	
Blue	B	0	0		6569	0	N	1	001	2	C	N	1	Y	0	B	
Indigo	I	0	0	0	6064		N	1	001	1	C	N	1	Y	0	B	
Violet	V	0	0	1	6569		N	1	001	1	C	N	1	Y	0	B	
Sky	B	0	0	0	7074		N	1	001	1	C	N	0	Y	0	B	

	54	55	56	57	58	59	60	61	62	63	64	65	66	
Surname	First Initial	Part C Basic Premium Part A Amt	Part C Basic Premium Part B Amount	Rebate for Part A Cost Sharing Reduction	Rebate for Part B Cost Sharing Reduction	Rebate for Other Part A Mandatory Supp Benefits	Rebate for Other Part B Mandatory Supp Benefits	Rebate for Part B Premium Reduction Part A Amt	Rebate for Part B Premium Reduction Part B Amt	Rebate for Part D Supp Benefits Part A Amt	Rebate for Part D Supp Benefits Part B Amt	Total Part A MA Pymt	Total Part B MA Pymt	Total MA Pymt Amt
Red	R	0	0	19.01	17.17	5.42	4.89	0	0	12.82	11.58	366.93	331.55	698.48
Red	R	0	0	19.01	17.17	5.42	4.89	0	0	12.82	11.58	366.93	331.55	698.48
Orange	O	0	0	19.01	17.17	5.42	4.89	0	0	12.82	11.58	312.47	282.32	594.79
Yellow	Y	0	0	0.12	0.10	20.93	18.92	0	0	8.61	7.79	339.79	307.05	646.84
Yellow	Y	0	0	0.12	0.10	20.93	18.92	0	0	8.61	7.79	339.79	307.05	646.84
Green	G	0	0	19.01	17.17	5.42	4.89	0	0	12.82	11.58	285.50	257.96	543.46
Blue	B	0	0	-19.01	(17.17)	-5.42	-4.89	0	0	-12.82	-11.58	-821.38	-742.19	-1563.57
Indigo	I	0	0	19.01	17.17	5.42	4.89	0	0	12.82	11.58	60.44	54.59	115.03
Violet	V	0	0	19.01	17.17	5.42	4.89	0	0	12.82	11.58	638.54	576.97	1215.51
Sky	B	0	0	19.01	17.17	5.42	4.89	0	0	12.82	11.58	208.12	188.04	396.16



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	67	68	69	70	71	72	73	74	75	76	77	78	79	80	
Surname	First Initial	Part D RA Factor	Part D LI Indic	Part D LI Multip	Part D LTI Indic	Part D LTI Multip	Rebate for Part D Basic Premium Reduction	Part D Basic Premium Amt	Part D Direct Subsidy Monthly Pymt Amt	Reinsurance Subsidy Amount	LICS	Total Part D Pymt	Number of Pymt/ Adjust Months Part D	PACE Premium Add On	PACE Cost Sharing Addon
Red	R	0.917	Y	1		0	27.30	45.33	45.22	32.33	95.36	218.21	1	0	0
Red	R	0.917	Y	1		0	27.30	45.33	45.22	32.33	95.36	218.21	1	0	0
Orange	O	1.461	N	0		0	27.30	45.33	98.94	32.33	0.00	164.36	1	0	0
Yellow	Y	1.221	Y	1		0	37.60	63.77	79.32	60.25	111.10	314.47	1	0	0
Yellow	Y	1.221	Y	1		0	37.60	63.77	79.32	60.25	111.10	314.47	1	0	0
Green	G	0.750	N	0		0	27.30	45.33	28.73	32.33	0.00	94.15	1	0	0
Blue	B	1.248	Y	1		0	-27.30	-45.33	-77.91	-32.33	-95.36	-250.90	1	0	0
Indigo	I	0.628	N	0		0	27.30	45.33	16.69	32.33	0.00	82.11	1	0	0
Violet	V	1.434	Y	1		0	27.30	45.33	96.28	32.33	95.36	269.27	1	0	0
Sky	B	1.039	N	0		0	27.30	45.33	57.27	32.33	0.00	122.69	1	0	0

	81	82	83	84	85	86	87	88	89	90	91	92	
Surname	First Initial	Part C Frailty Score Factor	MSP Factor	MSP Reduction/Reduction Adjust Amt Part A	MSP Reduction/Reduction Adjust Amt Part B	Medicaid Dual Status Code	Part D CGD Amt	Part D RAFT	Default Part D Risk Factor Code	Part A Risk Adjusted Monthly Rate Amt for Pymt/Adj	Part B Risk Adjusted Monthly Rate Amt for Pymt/Adj	Part D Direct Subsidy Monthly Rate Amt for Pymt/Adj	Cleanup ID
Red	R			0	0		0.00	D2		359.13	324.52	98.75	
Red	R			0	0	3	0.00	D2		359.13	324.52	98.75	
Orange	O			0	0	0	5.79	D1		351.94	318.01	98.75	
Yellow	Y			0	0		0.00	D2		377.75	341.34	117.19	
Yellow	Y			0	0	8	0.00	D2		377.75	341.34	117.19	
Green	G			0	0	0	5.79	D1		361.35	326.52	98.75	
Blue	B			0	0		0.00	D2		361.35	326.52	98.75	
Indigo	I		0.174	110.06	99.45	0	5.79	D1		362.09	327.17	98.75	
Violet	V			0	0	2	0.00	D2		361.35	326.52	98.75	
Sky	B			0	0	0	5.79	D1		360.49	325.73	98.75	



REPORT RECONCILIATION BOOT CAMP – WORKBOOK REPORTS

Figure 2B – Low Income Subsidy (LIS)/Late Enrollment Penalty (LEP) Report Data File - Detail Record

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20
Record Type	MCO Contract Num	PBP Num	Plan Seg Num	HIC Number	Surname	First Initial	Sex	DOB	Filler	Premium/ Adjust Period Start Date	Premium/ Adjust Period End Date	Number of Months in Prem/ Adjust Period	Net Monthly Part D Basic Premium	LIPS Percent	PPO	Prem LIS Amt	Net LEP Amount for Direct Billed Members	Net Amount Payable to Plan	End Filler
PD	H0490	1	0	XXXXXXXX1A	Red	R	F	xxxxxxx		201204	201204	1	18.00	100	N	18.00	0	18.00	
AD	H0490	1	0	XXXXXXXX1A	Red	R	F	xxxxxxx		201203	201203	1	18.00	100	N	18.00	0	18.00	
AD	H0490	1	0	XXXXXXXX4A	Blue	B	M	xxxxxxx		201203	201203	1	0.00			-18.00	0	-18.00	
PD	H0490	4	0	XXXXXXXX3B	Yellow	Y	F	xxxxxxx		201204	201204	1	26.20	100	N	26.20	0	26.20	
AD	H0490	4	0	XXXXXXXX3B	Yellow	Y	F	xxxxxxx		201203	201203	1	26.20	100	N	26.20	0	26.20	
PD	H0490	1	0	XXXXXXXX7A	Violet	V	F	xxxxxxx		201204	201204	1	18.00	100	N	18.00	0	18.00	

Figure 2C – Monthly Premium Withhold Report (MPWR) Data File - Detail Record

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18
Record Type	MCO Contract Number	Plan Benefit Package Id	Plan Segment Id	HIC Number	Surname	First Initial	Sex	Date of Birth	PPO	Filler	Premium Period Start Date	Premium Period End Date	Number of Months in Premium Period	Part C Premiums Collected	Part D Premiums Collected	Part D Late Enrollment Penalties Collected	End Filler
D	H0490	1	000	XXXXXXXX6A	Indigo	I	F	xxxxxxx	SSA		20120201	20120331	2	0.00	36.00	0.00	
D	H0490	1	000	XXXXXXXX4A	Green	G	F	xxxxxxx	SSA		20120301	20120331	1	0.00	18.00	0.90	



REPORT RECONCILIATION BOOT CAMP – WORKBOOK REPORTS

Figure 2D – Plan Payment Report – Table 1

CMS MONTHLY PLAN PAYMENT REPORT

PAGE: 1/5

PLAN NUMBER : H9999
 PLAN NAME : XXXXXXXXXXXXXXXXXXXXXXXX
 PAYMENT MONTH : 04/2012
 RUN DATE : 04/22/2012
 REPORT SECTION: CAPITATED PAYMENT - CURRENT ACTIVITY
 TABLE NUMBER : 1

ARC	PAYMENT TYPE	COUNT	PART A	PART B	PART D	NET PAYMENT
	PROSPECTIVE PART A PAYMENT	7	2,211.79			2,211.79
	PROSPECTIVE PART B PAYMENT	7		1,998.48		1,998.48
	PROSPECTIVE PART D PAYMENT	7			1,203.06	1,203.06
(01)	DEATH OF BENEFICIARY	0	0.00	0.00	0.00	0.00
(02)	RETROACTIVE ENROLLMENT	2	706.72	638.60	488.48	1,833.80
(03)	RETROACTIVE DISENROLLMENT	1	-821.38	-742.19	-232.90	-1,796.47
(06)	CORRECT PART A ENT	0	0.00	0.00	0.00	0.00
(07)	RETRO HOSPICE STATUS	0	0.00	0.00	0.00	0.00
(08)	RETRO ESRD STATUS	0	0.00	0.00	0.00	0.00
(09)	RETRO INST STATUS	0	0.00	0.00	0.00	0.00
(10)	RETRO MEDICAID STATUS	0	0.00	0.00	0.00	0.00
(11)	RETRO STATE COUNTY CHANGE	0	0.00	0.00	0.00	0.00
(12)	DATE OF DEATH CORRECTION	0	0.00	0.00	0.00	0.00
(13)	DATE OF BIRTH CORRECTION	0	0.00	0.00	0.00	0.00
(14)	SEX CODE CORRECTION	0	0.00	0.00	0.00	0.00
(18)	PART C RATE CHANGE	0	0.00	0.00	0.00	0.00
(19)	CORRECT PART B ENT	0	0.00	0.00	0.00	0.00
(20)	RETRO WORKING AGED STATUS	0	0.00	0.00	0.00	0.00
(21)	RETRO NHC STATUS	0	0.00	0.00	0.00	0.00
(22)	DISENROLL FOR PRIOR ESRD	0	0.00	0.00	0.00	0.00
(23)	DEMO FACTOR ADJUSTMENT	0	0.00	0.00	0.00	0.00
(25)	RETRO RA RECON ANNUAL	0	0.00	0.00	0.00	0.00
(26)	RETRO RA RECON MID-YEAR	0	0.00	0.00	0.00	0.00
(27)	RETRO CHF	0	0.00	0.00	0.00	0.00
(31)	RETRO LIS STATUS	0	0.00	0.00	0.00	0.00
(36)	PART D RATE CHANGE	0	0.00	0.00	0.00	0.00
(37)	PART D RA RECON ANNUAL	0	0.00	0.00	0.00	0.00
(38)	RETRO SEGMENT ID CHANGE	0	0.00	0.00	0.00	0.00
(41)	PART D RA RECON MID-YEAR	0	0.00	0.00	0.00	0.00
(42)	RETRO MSP FACTOR CHG	0	0.00	0.00	0.00	0.00
(44)	RETRO CORRECT FAILD PAY	0	0.00	0.00	0.00	0.00
(45)	DISENR FAIL PAY IRMAA PREM	0	0.00	0.00	0.00	0.00
(46)	RETRO CORRECT D ELIGIBILIT	0	0.00	0.00	0.00	0.00
(50)	BENE MERGE ADJUSTMNT	0	0.00	0.00	0.00	0.00
(94)	PMT ADJ DUE TO CLEANUP	0	0.00	0.00	0.00	0.00
TOTAL		24	2,097.13	1,894.89	1,458.64	5,450.66

** THE TOTAL PART D INCLUDES COVERAGE GAP DISCOUNT OF:
 PROSPECTIVE = 23.16
 ADJUSTMENT = 0.00
 TOTAL = 23.16

 * CMS SENSITIVE INFORMATION - REQUIRES SPECIAL HANDLING *



REPORT RECONCILIATION BOOT CAMP – WORKBOOK REPORTS

Figure 2D – Plan Payment Report – Table 2

CMS MONTHLY PLAN PAYMENT REPORT

PAGE: 2/5

PLAN NUMBER : H9999
PLAN NAME : XXXXXXXXXXXXXXXXXXXXXXXX
PAYMENT MONTH : 04/2012
RUN DATE : 03/22/2012
REPORT SECTION: PREMIUM SETTLEMENT
TABLE NUMBER : 2

PAYMENT CATEGORY	PART C	PART D	NET PAYMENT
PART C PREMIUM WITHOLDING	0.00		0.00
PART D PREMIUM WITHOLDING		54.00	54.00
PART D LOW INCOME PREMIUM SUBSIDY		88.40	88.40
PART D LATE ENROLL PENALTIES (DIRECT BILL)		0.00	0.00
TOTAL	0.00	143.30	143.30

* CMS SENSITIVE INFORMATION - REQUIRES SPECIAL HANDLING *



REPORT RECONCILIATION BOOT CAMP – WORKBOOK REPORTS

Figure 2D – Plan Payment Report – Table 3

CMS MONTHLY PLAN PAYMENT REPORT

PAGE: 3/5

PLAN NUMBER : H9999
 PLAN NAME : XXXXXXXXXXXXXXXXXXXXXXXX
 PAYMENT MONTH : 04/2012
 RUN DATE : 03/22/2012
 REPORT SECTION: FEES
 TABLE NUMBER : 3

DESCRIPTION	INPUTS	PART A	PART B	PART D	NET PAYMENT
EDUCATION USER FEE:					
1) PART A AMT SUBJECT TO FEE	2,211.79				
2) X FEE RATE	0.00048	- 1.06			-1.06
3) PART B AMT SUBJECT TO FEE	1,998.48				
4) X FEE RATE	0.00048		-0.96		-0.96
5) PART D AMT SUBJECT TO FEE	1,203.06				
6) X FEE RATE	0.00048			-0.58	-0.58
TOTAL					-2.60
COB USER MEMBERS:					
1) PROSP D MEMBERS	7.00				
2) X FEE RATE	0.18			-1.26	-1.26
TOTAL		-1.06	-0.96	-1.84	-3.86

* CMS SENSITIVE INFORMATION - REQUIRES SPECIAL HANDLING *



REPORT RECONCILIATION BOOT CAMP – WORKBOOK REPORTS

Figure 2D – Plan Payment Report – Table 4

CMS MONTHLY PLAN PAYMENT REPORT

PLAN NUMBER : H9999 PAGE: 4/5
 PLAN NAME : XXXXXXXXXXXXXXXXXXXXXXXX
 PAYMENT MONTH : 04/2012
 RUN DATE : 03/22/2012
 REPORT SECTION: SPECIAL ADJUSTMENT
 TABLE NUMBER : 4

DOC ID	DESCRIPTION	SOURCE	TYPE	PAYMENT CATEGORY	PART A	PART B	PART D/HITECH	NET PAYMENT
2012-0028	CGD INVOICE OFFSETS	DPR	CGD	CAPITATED	0.00	0.00	-1,070.14	-1,070.14
				PREMIUM C	0.00	0.00		0.00
				PREMIUM D			0.00	0.00
				LIS			0.00	0.00
TOTAL					0.00	0.00	-1,070.14	-1,070.14

 * CMS SENSITIVE INFORMATION - REQUIRES SPECIAL HANDLING *

 CGD = COVERAGE GAP DISCOUNT INVOICE
 CMP = CIVIL MONETARY PENALTY
 CST = COST PLAN ADJUSTMENT
 PTD = PART D RISK ADJUSTMENT
 OTH = OTHER - NON SPECIFIC ADJUSTMENT GROUP
 RSK = RISK ADJUSTMENTS
 PRS = ANNUAL PART D RECONCILIATION



REPORT RECONCILIATION BOOT CAMP – WORKBOOK REPORTS

Figure 2D – Plan Payment Report – Table 5

CMS MONTHLY PLAN PAYMENT REPORT

PAGE: 5/5

PLAN NUMBER : H9999
 PLAN NAME : XXXXXXXXXXXXXXXXXXXXXXXX
 PAYMENT MONTH : 04/2012
 RUN DATE : 03/22/2012
 REPORT SECTION: PAYMENT SUMMARY
 TABLE NUMBER : 5

SOURCE	PAYMENT SUMMARY	PAYMENT TYPE	PREVIOUS BALANCE	CURRENT ACTIVITY	NET PAYMENT	BALANCE FORWARD
TABLE 1	PART A	CAPITATED	0.00	2,097.13	2,097.13	0.00
TABLE 1	PART B	CAPITATED	0.00	1,894.89	1,894.89	0.00
TABLE 1	PART D	CAPITATED	0.00	1,458.64	1,458.64	0.00
TABLE 2	PART C PREMIUM WITHHOLDING	PREMIUM	0.00	0.00	0.00	0.00
TABLE 2	PART D PREMIUM WITHHOLDING	PREMIUM	0.00	54.00	54.00	0.00
TABLE 2	PART D LOW INCOME PREMIUM SUBSIDY	PREMIUM	0.00	88.40	88.40	0.00
TABLE 2	PART D LATE ENROL PENALTIES	PREMIUM	0.00	0.00	0.00	0.00
TABLE 3	EDUCATION USER FEE	FEES	0.00	-2.60	-2.60	0.00
TABLE 3	PART D COB USER FEE	FEES	0.00	-1.26	-1.26	0.00
TABLE 4	CMS ADJUSTMENTS	SPEC ADJ	0.00	-1,070.14	-1,070.14	0.00
TOTAL			0.00	4,519.06	4,519.06	0.00

 * CMS SENSITIVE INFORMATION - REQUIRES SPECIAL HANDLING *



REPORT RECONCILIATION BOOT CAMP – WORKBOOK ANSWER KEY

MODULE 2 – REPORT RECONCILIATION BOOT CAMP – WORKBOOK ANSWER KEY

Exercise 1

Beneficiary 1: R. Red (prospective record)

Calculating the Part C Payment from the MMR

Step 1: Calculate Part A Payment

Payment Calculation Amount for Part A	MMR Field #		
Risk Adjuster Payment/Adjustment Amount Part A	33		329.68
MSP Reduction/Reduction Adjustment Amount	83	-	0.00
Rebate for Part A Cost Sharing Reduction	56	+	19.01
Rebate for Other Part A Mandatory Supplemental Benefits	58	+	5.42
Part D Supplemental Benefits Part A Amount	62	+	12.82
Total Part A Payment		=	366.93

Step 2: Calculate Part B Payment

Payment Calculation Amount for Part B	MMR Field #		
Risk Adjuster Payment/Adjustment Amount Part B	34		297.91
MSP Reduction/Reduction Adjustment Amount	84	-	0.00
Rebate for Part B Cost Sharing Reduction	57	+	17.17
Rebate for Other Part B Mandatory Supplemental Benefits	59	+	4.89
Part D Supplemental Benefits Part B Amount	63	+	11.58
Total Part B Payment		=	331.55

Step 3: Calculate Total MA Payment

To obtain the Total MA Payment for the beneficiary, Rainbow Health will add the total amounts from Steps 1 and 2.

Total MA Payment Calculation Amount	Step		
Total Part A Payment	1		366.93
Total Part B Payment	2	+	331.55
Total MA Payment		=	698.48



REPORT RECONCILIATION BOOT CAMP – WORKBOOK ANSWER KEY

Step 4: Calculate Part D Payment

Payment Calculation Amount for Part D	MMR Field #		
Low Income Premium Subsidy (LIPS)*	35		18.00
MA Rebate for Part D Basic Premium Reduction	72	+	27.30
Part D Direct Subsidy Amount	74	+	45.22
Reinsurance Subsidy Amount	75	+	32.33
Low-Income Subsidy Payment Amount	76	+	95.36
Coverage Gap Discount Amount	86	+	0.00
Total Part D Payment		=	218.21

*LIPS is included in the Total Part D Payment, but is not included in the Prospective Part D Payment on the Plan Payment Report.

Step 5: Calculating the Total Payment

To obtain the final payment for the beneficiary, Rainbow Health will add the total amounts from Steps 3 and 4.

	Step		
Total MA Payment	3		698.48
Total Part D Payment	4	+	218.21
Total MA-PD Payment		=	916.69

Note: There is also an adjusted record on the MMR for this beneficiary for a retroactive enrollment. That had the same values for payment amounts retroactive to March 2012.



REPORT RECONCILIATION BOOT CAMP – WORKBOOK ANSWER KEY

Beneficiary 2: Y. Yellow (prospective record)

Calculating the Part C Payment from the MMR

Step 1: Calculate Part A Payment

<u>Payment Calculation Amount for Part A</u>	<u>MMR Field #</u>		
Risk Adjuster Payment/Adjustment Amount Part A	33		310.13
MSP Reduction/Reduction Adjustment Amount	83	-	0.00
Rebate for Part A Cost Sharing Reduction	56	+	0.12
Rebate for Other Part A Mandatory Supplemental Benefits	58	+	20.93
Part D Supplemental Benefits Part A Amount	62	+	8.61
Total Part A Payment		=	339.79

Step 2: Calculate Part B Payment

<u>Payment Calculation Amount for Part B</u>	<u>MMR Field #</u>		
Risk Adjuster Payment/Adjustment Amount Part B	34		280.24
MSP Reduction/Reduction Adjustment Amount	84	-	0.00
Rebate for Part B Cost Sharing Reduction	57	+	0.10
Rebate for Other Part B Mandatory Supplemental Benefits	59	+	18.92
Part D Supplemental Benefits Part B Amount	63	+	7.79
Total Part B Payment		=	307.05

Step 3: Calculate Total MA Payment

To obtain the Total MA Payment for the beneficiary, Rainbow Health will add the total amounts from Steps 1 and 2.

<u>Total MA Payment Calculation Amount</u>	<u>Step</u>		
Total Part A Payment	1		339.79
Total Part B Payment	2	+	307.05
Total MA Payment		=	646.84



REPORT RECONCILIATION BOOT CAMP – WORKBOOK ANSWER KEY

Step 4: Calculate Part D Payment

<u>Payment Calculation Amount for Part D</u>	<u>MMR Field #</u>		
Low Income Premium Subsidy (LIPS)*	35		26.20
MA Rebate for Part D Basic Premium Reduction	72	+	37.60
Part D Direct Subsidy Amount	74	+	79.32
Reinsurance Subsidy Amount	75	+	60.25
Low-Income Subsidy Payment Amount	76	+	111.10
Coverage Gap Discount Amount	86	+	0.00
Total Part D Payment		=	314.47

*LIPS is included in the Total Part D Payment, but is not included in the Prospective Part D Payment on the Plan Payment Report.

Step 5: Calculating the Total Payment

To obtain the final payment for the beneficiary, Rainbow Health will add the total amounts from Steps 3 and 4.

	<u>Step</u>		
Total MA Payment	3		646.84
Total Part D Payment	4	+	314.47
Total MA-PD Payment		=	961.31

Note: There is also an adjusted record on the MMR for this beneficiary for a retroactive enrollment. That had the same values for payment amounts retroactive to March 2012.



REPORT RECONCILIATION BOOT CAMP – WORKBOOK ANSWER KEY

Beneficiary 3: I. Indigo

Calculating the Part C Payment from the MMR

Step 1: Calculate Part A Payment

<u>Payment Calculation Amount for Part A</u>	<u>MMR Field #</u>		
Risk Adjuster Payment/Adjustment Amount Part A	33		133.25
MSP Reduction/Reduction Adjustment Amount	83	-	110.06
Rebate for Part A Cost Sharing Reduction	56	+	19.01
Rebate for Other Part A Mandatory Supplemental Benefits	58	+	5.42
Part D Supplemental Benefits Part A Amount	62	+	12.82
Total Part A Payment		=	60.44

Step 2: Calculate Part B Payment

<u>Payment Calculation Amount for Part B</u>	<u>MMR Field #</u>		
Risk Adjuster Payment/Adjustment Amount Part B	34		120.40
MSP Reduction/Reduction Adjustment Amount	84	-	99.45
Rebate for Part B Cost Sharing Reduction	57	+	17.17
Rebate for Other Part B Mandatory Supplemental Benefits	59	+	4.89
Part D Supplemental Benefits Part B Amount	63	+	11.58
Total Part B Payment		=	54.59

Step 3: Calculate Total MA Payment

To obtain the Total MA Payment for the beneficiary, Rainbow Health will add the total amounts from Steps 1 and 2.

<u>Total MA Payment Calculation Amount</u>	<u>Step</u>		
Total Part A Payment	1		60.44
Total Part B Payment	2	+	54.59
Total MA Payment			115.03



REPORT RECONCILIATION BOOT CAMP – WORKBOOK ANSWER KEY

Step 4: Calculate Part D Payment

Payment Calculation Amount for Part D	MMR Field #		
Low Income Premium Subsidy (LIPS)*	35		0.00
MA Rebate for Part D Basic Premium Reduction	72	+	27.30
Part D Direct Subsidy Amount	74	+	16.69
Reinsurance Subsidy Amount	75	+	32.33
Low-Income Subsidy Payment Amount	76	+	0.00
Coverage Gap Discount Amount	86	+	5.79
Total Part D Payment		=	82.11

*LIPS is included in the Total Part D Payment, but is not included in the Prospective Part D Payment on the Plan Payment Report.

Step 5: Calculating the Total Payment

To obtain the final payment for the beneficiary, Rainbow Health will add the total amounts from Steps 3 and 4.

	Step		
Total MA Payment	3		115.03
Total Part D Payment	4	+	82.11
Total MA-PD Payment		=	197.14



REPORT RECONCILIATION BOOT CAMP – WORKBOOK ANSWER KEY

Exercise 2

Reconciling MMR with PPR Table 1 – Prospective Records

Calculate Part A Prospective Payment

<u>Payment Calculation Amount for Part A</u>	<u>MMR Field #</u>		
Risk Adjuster Payment/Adjustment Amount Part A	33		2,068.69
MSP Reduction/Reduction Adjustment Amount	83	-	110.06
Rebate for Part A Cost Sharing Reduction	56	+	114.18
Rebate for Other Part A Mandatory Supplemental Benefits	58	+	53.45
Part D Supplemental Benefits Part A Amount	62	+	85.53
Total Part A Payment		=	2,211.79

Calculate Part B Prospective Payment

<u>Payment Calculation Amount for Part B</u>	<u>MMR Field #</u>		
Risk Adjuster Payment/Adjustment Amount Part B	34		1,869.28
MSP Reduction/Reduction Adjustment Amount	84	-	99.45
Rebate for Part B Cost Sharing Reduction	57	+	103.12
Rebate for Other Part B Mandatory Supplemental Benefits	59	+	48.26
Part D Supplemental Benefits Part B Amount	63	+	77.27
Total Part B Payment		=	1,998.48

Calculate Part D Prospective Payment

<u>Payment Calculation Amount for Part D</u>	<u>MMR Field #</u>		
MA Rebate for Part D Basic Premium Reduction	72		201.40
Part D Direct Subsidy Amount	74	+	422.45
Reinsurance Subsidy Amount	75	+	254.23
Low-Income Subsidy Payment Amount	76	+	301.82
Coverage Gap Discount Amount	86	+	23.16
Total Part D Payment		=	1,203.06



REPORT RECONCILIATION BOOT CAMP – WORKBOOK ANSWER KEY

Reconciling MMR with PPR Table 1 – Adjustment Records

Calculate Part A Adjustment Payments

Payment Calculation Amount for Part A	MMR Field #	ARC 02	ARC 03
Risk Adjuster Payment/Adjustment Amount Part A	33	639.81	-784.13
MSP Reduction/Reduction Adjustment Amount	83	- 0.00	- 0.00
Rebate for Part A Cost Sharing Reduction	56	+ 19.13	+ -19.01
Rebate for Other Part A Mandatory Supplemental Benefits	58	+ 26.35	+ -5.42
Part D Supplemental Benefits Part A Amount	62	+ 21.43	+ -12.82
Total Part A Adjustment Payment Amounts		= 706.72	= -821.38

Calculate Part B Adjustment Payment

Payment Calculation Amount for Part B	MMR Field #	ARC 02	ARC 03
Risk Adjuster Payment/Adjustment Amount Part B	34	578.15	-708.55
MSP Reduction/Reduction Adjustment Amount	84	- 0.00	- 0.00
Rebate for Part B Cost Sharing Reduction	57	+ 17.27	+ -17.17
Rebate for Other Part B Mandatory Supplemental Benefits	59	+ 23.81	+ -4.89
Part D Supplemental Benefits Part B Amount	63	+ 19.37	+ -11.58
Total Part B Adjustment Payment Amounts		= 638.60	= -742.19

Calculate Part D Adjustment Payment

Payment Calculation Amount for Part D	MMR Field #	ARC 02	ARC 03
MA Rebate for Part D Basic Premium Reduction	72	64.90	-27.30
Part D Direct Subsidy Amount	74	+ 124.54	+ -77.91
Reinsurance Subsidy Amount	75	+ 92.58	+ -32.33
Low-Income Subsidy Payment Amount	76	+ 206.46	+ -95.36
Coverage Gap Discount Amount	86	+ 0.00	+ 0.00
Total Part D Adjustment Payment Amounts		= 488.48	= -232.90



REPORT RECONCILIATION BOOT CAMP – WORKBOOK ANSWER KEY

Reconciling MMR with PPR Table 2

<u>Description of Field</u>	<u>MMR Field #</u>		
Low Income Premium Subsidy (LIPS)*	35	=	<u>88.40</u>

*Note: The MMR is the primary source for LIPS on Table 2 of the PPR. However, the Premium LIS Amount in Field 17 on the Low Income Subsidy (LIS)/Late Enrollment Penalty (LEP) Report should match the LIPS amount on the MMR.

Reconciling Low Income Subsidy (LIS)/Late Enrollment Penalty (LEP) Report with PPR Table 2

<u>Description of Field</u>	<u>LIS/LEP Field #</u>		
Net LEP Amount for Direct Billed Members	18	=	<u>0.00</u>

Reconciling Monthly Premium Withhold Report (MPWR) with PPR Table 2

<u>Description of Field</u>	<u>MPWR Field #</u>		
Part C Premiums Collected	15	=	<u>0.00</u>
Part D Premiums Collected	16	=	<u>54.00</u>

PPR Table 3

	<u>Prospective Amount</u>		<u>Fee Rate</u>		
Education User Fee					
Part A Prospective Amount	<u>2,211.79</u>	x	<u>0.00048</u>	=	<u>-1.06</u>
Part B Prospective Amount	<u>1,998.48</u>	x	<u>0.00048</u>	=	<u>-0.96</u>
Part D Prospective Amount	<u>1,203.06</u>	x	<u>0.00048</u>	=	<u>-0.58</u>
COB User Fee					
Part D Member Count	<u>7</u>	x	<u>0.18</u>	=	<u>-1.26</u>

Note: that the fees are negative amounts since they are subtracted from the payment.

PPR Table 4

Table 4 provides the Special Adjustment Payments, if any that are applicable for the month.

PPR Table 5 (refer to page WR-9)

Table 5 provides a summary of the payments from Tables 1, 2, 3, and 4. In addition, if there are payments carried over from the previous month, they will appear on this table as will any payments to carry forward to the next payment month.