**Quality assurance process for PDP/MA-PD enrollment cost change data**

This guidance outlines the Administration for Community Living (ACL) required, semi-annual Quality Assurance (QA) process to verify cost change data for Medicare Part D Prescription Drug Plan (PDP) and Medicare Advantage Prescription Drug (MA-PD) plan enrollment contacts reported on the Beneficiary Contact Form in the SHIP Tracking and Reporting System (STARS). These semi-annual QA reviews will verify enrollment contacts are complete. ACL and State Health Insurance Assistance Program (SHIP) grantees must complete the full 5 step QA process, described below, prior to sharing cost change data publicly.

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| What items are required to verify the enrollment contact is complete? | |
| 1. Enrollment Box | Enrollment is checked as a subtopic for either:   * Medicare Part D   **OR**   * Medicare Advantage |
| 1. Plan Costs | Plan costs in the Special Use Fields (SUF) are numeric, and greater than $0:   * Original PDP/MAPD Cost   **AND**   * New PDP/MA-PD Cost |
| 1. Verifications | Verification documentation attached or signed attestation that it is on file:   * Plan Comparison page from the Medicare Plan Finder (MPF)   **AND**   * Documentation to verify the Enrollment Request. |

**Need STARS cost change data reporting guidance?**

Visit the STARS manual located in the password protected section of the SHIP Technical Assistance Center Resource Library [www.shiptacenter.org](http://www.shiptacenter.org) Reporting advice for cost change enrollment contacts are located in Chapter 4 *Beneficiary Contacts*, pages 20-26.

**Quality Assurance Process**

**Step 1: ACL provides enrollment contacts report**

ACL will provide a report of PDP and MA-PD enrollment cost change data twice annually. One report will be provided to the SHIP Director in February covering the period of August to January. The second report will be provided in August covering the period of February to July. The report will contain the following:

1. A list of enrollment contacts entered into STARS for the six month time frame.
2. An indication of whether the enrollment contacts are valid or flagged defined in the following ways:
   1. **Valid enrollment contacts** meet these required criteria:
      * Enrollment Box is checked, and
      * Plan Cost data in Original and New PDP/MA-PD SUFs are numeric and greater than $0.
   2. **Flagged enrollment contacts** are those with:
      * Incomplete or missing data,
      * SUF cost data are nonnumeric or $0,
      * Both PDP and MAPD enrollment boxes are selected, or
      * Cost change amounts outside the threshold.

**Step 2: SHIP reviews, verifies, and edits enrollment contacts**

SHIP grantees must complete the QA process by the end of the month following receipt of the report. QA review of the February report is due by March 30th. QA review of the August report is due Sept 30th. SHIP grantees must complete the following QA review process:

1. Review Valid Enrollment Contacts

**Review a minimum of 5% of valid contacts to ensure required verification documentation** (plan comparison and enrollment request) is attached in STARS or is available in paper or electronic files. If required verification documentation is not available, cost change data must be removed from the Original PDP/MA-PD costs and New PDP/MA-PD cost SUFs.

1. Review Flagged Enrollment Contacts

**Review and edit ALL flagged contacts.** The scenarios below outline common scenarios where edits are needed:

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| **Common Verification Documentation Flags** | **Edits** |
| **Verification documentation not uploaded API.** Documentation not uploaded into STARS due to API or non-Medicare Plan Finder (enrolled by phone, plan website, etc.) | SHIP stores verification documentation outside STARS and attest to it. |
| **Verification documentation does not exist**. Enrollment completed AND both required verification documents do not exist. | Remove cost data from SUFs. This applies to API and direct entry states. |
| **Verification documentation is incomplete.** Enrollment completed, but either the plan comparison or enrollment request form is missing. | If available, upload or attest paper or electronic files are available. If unavailable, remove cost data from SUFs (applies to API and direct entry). |

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| **Common Enrollment Box Flags** | | **Edits** |
| **Cost data in SUFs, enrollment box not checked.** Cost data reported and verification documentation uploaded. | | Check appropriate MA-PD or PDP enrollment box. |
| **Enrollment box not checked, missing verification documents.** Enrollment box not checked and required verification documents missing. | | If verification documentation is available, check enrollment box and upload documents (or attest it is on file). If verification documentation is not available, remove cost data from SUFs. |
| **Enrollment boxes checked for PDP and MA-PD.** Beneficiary enrolled into one plan yet both the PDP and MA-PD enrollment boxes are selected. | | Review verification documents and select one appropriate enrollment box. NOTE: During OEP, two enrollments may occur in one counseling session, selecting both enrollment boxes is appropriate in this situation only. |
| **No enrollment with SUF Text Issues.** No enrollment completed AND non-numeric text entered in SUFs. | Remove text data from cost SUFs. |

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| **Common SUF Flags** | **Edits** |
| **Cost data not reported in SUFs.** Enrollment box checked AND verification documentation has been uploaded. | Enter cost data in SUFs as shown on plan comparison page. |
| **Threshold.** Record outside the defined cost change threshold. | Verify cost data and verification documentation. |
| **Enrollment with SUF Text Issues.** Enrollment completed, but non-numeric text entered in SUFs. | Enter cost data from plan comparison in cost SUFs. |
| **Duplication.** More than one BCF contains the same Original and New PDP/MA-PD SUF costs. | Verify cost data, enrollment, verification documentation and remove cost data for duplicative BCFs. |

1. Grantees entering STARS data vis the Application Programming Interface (API) process experiencing issues with the transfer of enrollment outcomes data should contact the proprietary vendor to identify issues with the API endpoints. The proprietary vendor may need to work with the STARS Help Desk to resolve these issues.

**Step 3: SHIP Training**

Grantees shall continue to train or re-train SHIP Team members to ensure enrollment contact data is correctly reported and documented.

**Step 4: SHIP Part D Enrollment Outcomes Attestation**

1. SHIP grantees must complete the ***SHIP Part D Enrollment Quality Assurance Outcomes Attestation*** (by March 30th and September 30th) to verify the QA process is complete.
2. SHIP grantees must submit the attestation to the SHIP email box [SHIP@acl.gov](mailto:SHIP@acl.gov)

**Step 5: ACL Review of Complete Records**

After receipt of ***SHIP Part D Enrollment Attestation*** forms, ACL will conduct a final review of a minimum of 5 % of the Enrollment Outcome contacts. ACL will move cost change data for any records deemed incomplete in the randomly selected national sample from the SUFs to the Notes field.

**What’s the Part D Enrollment Records Retention Policy?**

ACL’s grantee record retention policy requires grantees to keep all documentation for a grant for a minimum of 3 years after the submission of the final report. For instance, the current SHIP grant ends on 3/31/2020, and the final report is due on 7/1/2020. As such, SHIPs must maintain grant related files, including Part D cost change data verification documentation, until 7/1/2023.

Attaching verification documentation in STARS meets the requirement for Record Retention in Part D Enrollment Outcomes work.

**Part D Enrollment Outcomes Quality Assurance Attestation for**

**State Health Insurance Assistance Program (SHIP) Directors**

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, verify that as of \_\_\_ March 30 or \_\_\_ September 30 (check one), completed the SHIPs Part D Enrollment Outcomes Quality Assurance Review for the SHIP located in \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ including:

I **reviewed a minimum of 5% of valid enrollment contacts** and verified each contact contains the required verification documents as attachments in STARS or on are on file (plan comparison and enrollment request).

I **edited ALL flagged enrollment contacts** and verified each contact contains the required verification documents as attachments in STARS or on are on file (plan comparison and enrollment request).

I **trained/retrained SHIP Team members** on reporting enrollment contacts.

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