TO: $\quad$ Medicare + Choice $(\mathrm{M}+\mathrm{C})$ Organizations, Medicare Capitated Demonstrations, and Selected Specialty Plans

SUBJECT: Risk Adjustment Model Output Report Available for 2004 -ACTION

You recently received a letter describing changes to the Monthly Membership Report (MMR) for 2004, dated 6/19/2003. The purpose of this letter is to provide details regarding an additional monthly report that organizations will receive beginning in 2004. This new report, entitled the Risk Adjustment Model Output Report, is needed as the Centers for Medicare \& Medicaid Services (CMS) implements the new risk adjustment model for 2004.

The report will provide detailed information reflecting the basis for the risk adjustment score reflected in the MMR. Risk scores are calculated using the CMS Hierarchical Condition Category (CMS-HCC) model. The report will provide detailed information on the specific disease groups (called HCCs) and disease interactions triggered for an enrollee.

The Risk Adjustment Model Output Report displays the following information:

- Enrollee identifiers (Health Insurance Claim Numbers (or HICs), name, date of birth)
- Identifies the appropriate sex and age group, as well as other demographic interactions for an individual, (if applicable);
- Reflects the specific disease groups (HCCs) triggered; and
- Reflects disease interactions.

NOTE: Disease hierarchies will not be identified separately. If a hierarchy exists, then only the most severe manifestation in the hierarchy will be displayed on the report.

Example: A beneficiary triggered HCC 7 (Metastatic Cancer and Acute Leukemia) and HCC 9 (Lymphatic, Head and Neck, Brain, and Other Major Cancers). The report will reflect HCC 7, not HCC9

This report is used in conjunction with the MMR and beneficiary-specific information (residence-community vs. institution, Medicaid status, disability, etc.) to verify risk scores.

## Accessing the Report in GROUCH

The report will be available in GROUCH and can be downloaded in the same manner as your MMR. A formatted report and flat file versions will be available. See the attached layouts.

After you connect to the CMS Data Center, press ENTER, select 1 - TSO from the CMS Application Menu screen, login and proceed as follows.

- At the ISPF Primary Option Menu, enter TSO GROUCH on the command line of the ISPF menu and press ENTER twice.
- At the GROUCH Report menu screen, type a $T$ to the left of the RA MODEL OUTPUT and press the ENTER key.
- Go the TSO READY prompt by pressing F3 or enter $=x$ on the command line of the ISPF menu.
- Click on RECEIVE FILES FROM HOST icon on the left side of the tool bar.
- In the HOST FILE NAME block, type (in single quotes) 'XXXX.@BGD5050.RECEIVE.DATA' , XXXX = userid.
- In the PC FILE NAME block, type C:/PC FILE NAME.TXT (the name the user gives the report)
- Click on options and be sure that ASCII and CRLF are typed in the box.
- Click on OK on the FILE TRANSFER OPTIONS.
- The TRANSFER MODE Box should read TEXT.
- Click on ADD TO LIST.
- Click on the file entry in the "Transfer List".
- Click on "Receive" button.

If your organization directly downloads files without building a transmission file in GROUCH, use the following data set name:

## HKH.@BGD5050.PLNHXXXX.RMMYYYY.RAMODELR HKH.@BGD5050.PLNHXXXX.RMMYYYY.RAMODELD

HXXXX = your contract number

If you have questions regarding this report, please contact Jeff Grant at jgrant1@cms.hhs.gov.

If you have questions regarding accessing this report in GROUCH, please contact the Technical Support staff person assigned to the region where your M+C organization is located.

Regions I - III, VII Sarah Brown - 410.786.6358
Regions IV - VI Sue Hartmann - 410.786.6192
Regions VIII - X Sue Mathis - 410.786.6398

Sincerely,
/s/
Cynthia Tudor, Ph.D.
Director
Division of Program Analysis and Performance Measurement
Center for Beneficiary Choices
Centers for Medicare \& Medicaid Services

