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Centers for Medicare & Medicaid Services (CMS)
Federally-Facilitated Marketplace (FFM)

Risk Adjustment Data Validation Initial Validation Audit Statistics (RADVIVAS) Report Validation Job-Aid

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1 Introduction

This document contains additional detail on the Risk Adjustment Data Validation Initial Validation Audit Statistics (RADVIVAS) Report that is used by the Risk Adjustment Data Validation program. This document contains guidelines to assist issuers when validating the numbers on this report and highlights how the elements can be compared to elements in other External Data Gathering Environment (EDGE) server generated reports. For guidance on how to validate the RA Data Validation Population (RADVPS) Report please refer to the separate job-aid available on Registration for Technical Assistance Portal (REGTAP): Job Aid for Validation of RADVPS Reports.

The complete file layout for the RADVIVAS Report can be found in the interface control document (ICD) available on REGTAP: Interface Control Document - Risk Adjustment and Reinsurance Addendum Version 05.00.05 (4/24/17).

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2 RADVIVAS Validation Notes

The below table describes how to validate the elements included in the RADVIVAS Report. Note that the RADVIVAS Report includes the same data elements and statistics calculated in the RADVPS Report, however while the RADVPS Report includes all enrollees in the population, only enrollees selected for the Initial Validation Audit (IVA) sample are included in the RADVIVAS Report.

Since only IVA sample enrollees are included in the RADVIVAS Report, the statistics calculated can be validated against the enrollee and claim data included in the RADV Detailed Enrollee (RADVDE), RADV Enrollment Extract (RADVEE), RADV Medical Claim Extract (RADVMCE), and the RADV Supplemental Extract (RADVSE) Reports. For example, the Total Enrollees in the file header section of the RADVDE report should equal the Total Enrollees in the file header section of the RADVIVAS Report; and the sum of enrollees assigned to each strata in the RADVDE Report should equal the Stratum Size in the Stratum Indicator section of the RADVIVAS Report.

Table 1: RADVIVAS Report Elements

RADVIVAS Report Category	RADVIVAS Business Element Name	RADVIVAS XML Element Name	ICD Element Description	Validation Notes
File Header Category	Payment Year	paymentYear	For example, 2014 or 2015.	None. Indicates the payment year for which the report was executed.
File Header Category	Total Number of Plan IDs	totalNumberOfPlanIds	Total number of 16-digit Plan IDs for the risk score calculation.	None.
File Header Category	Total Enrollees	totalNumberEnrollees	Total number of unique enrollees selected for the risk score calculation in the sample.	The sum of the stratumSize for all strata should match the totalNumberEnrollees. This element should also match the number of enrollees included in the RADVDE Report.
Stratum Indicator Category	Stratum Indicator	stratumLevel	Strata 1-9 represent low, medium and high-risk enrollees with at least one (1) Hierarchical Condition Category (HCC) for each age model. Stratum 10 includes enrollees with no HCCs.	None. Indicates the stratum assigned.

RADVIVAS Report Category	RADVIVAS Business Element Name	RADVIVAS XML Element Name	ICD Element Description	Validation Notes
Stratum Indicator Category	Stratum Size	stratumSize	The total number of Enrollee IDs in the sample falling in this stratum.	The sum of the stratumSize for all strata should match the totalNumberEnrollees.
Stratum Indicator Category	Mean Risk Score	meanRiskScore	The weighted average of the risk score in the stratum of the sample using member months. This is using the risk score calculated for RADV based on the demographic, Cost-sharing Reduction (CSR), and HCC factors.	In order to be validated this element must be calculated by the issuer according to the element definition and using the below elements from the enrollment period level in the Risk Adjustment Risk Score Detail (RARSD) Report for all enrollees in the stratum as identified in the RADVDE Report: 1. The enrollee risk score (enrolleeRiskScore). 2. The later of the enrollment start date (coverageStartDate) and January 1st of the payment year. 3. The earlier of the enrollment end date (coverageEndDate) and December 31st of the payment year.
Stratum Indicator Category	Min Risk Score	minRiskScore	The minimum of the weighted average risk score in the stratum of the sample using member months. This is using the risk score calculated for RADV based on the demographic, CSR, and HCC factors.	This element must be determined based on the weighted average risk scores (enrolleeRiskScore) for all enrollees in the stratum as identified in the RADVDE Report.
Stratum Indicator Category	Max Risk Score	maxRiskScore	The maximum of the weighted average risk score in the stratum of the sample using member months. This is using the risk score calculated for RADV based on the demographic, CSR, and HCC factors.	This element must be determined based on the weighted average risk scores (enrolleeRiskScore) for all enrollees in the stratum as identified in the RADVDE Report.
Stratum Indicator Category	Standard Deviation Risk Score	stdDevRiskScore	The standard deviation of the weighted average risk score in the stratum of the sample using member months. This is using the risk score calculated for RADV based on the demographic, CSR, and HCC factors.	This element must be calculated using the sample standard deviation formula based on the weighted average risk score (enrolleeRiskScore) of each enrollee in the stratum as identified in the RADVDE Report.
Stratum Indicator Category	Minimum Date of Birth	minDateOfBirth	Minimum date of birth (DOB) of enrollees selected for the risk score calculation in the stratum of the sample.	This element must be determined based on the DOBs submitted by the issuer in the enrollment eXtensible Markup Language (XML) for all enrollees in the stratum. The DOBs for each enrollee are also included in the RADVDE Report (enrolleeDateOfBirth).

RADVIVAS Report Category	RADVIVAS Business Element Name	RADVIVAS XML Element Name	ICD Element Description	Validation Notes
Stratum Indicator Category	Maximum Date of Birth	maxDateOfBirth	Maximum DOB of enrollees selected for the risk score calculation in the stratum of the sample.	This element must be determined based on the DOBs submitted by the issuer in the enrollment XML for all enrollees in the stratum. The DOBs for each enrollee are also included in the RADVDE Report (enrolleeDateOfBirth).
Stratum Indicator Category	Mean Age	meanAge	Mean Age of enrollees selected for the risk score calculation (age as of the last day of the last enrollment period. Does not include infant age adjustments due to cross year births [adjusted from 1 to 0] or no HCCs [adjusted from 0 to 1]) in the stratum of the sample.	This element represents the average age of the enrollees included for RA in the stratum of the sample as identified in the RADVDE Report. The age should be calculated using the date of birth and the last day of coverage in the payment year for the enrollee in any plan in the RADVEE Report.
Stratum Indicator Category	Average Premium	averagePremium	Weighted average premium, using member months, of enrollees selected for the risk score calculation in the stratum of the sample. This element is calculated by dividing the total premium paid (totalPremiumAmount) by the total number of member months in the payment year of all enrollee's in the stratum of the sample. Note: Non-billable member months are included in the denominator when performing the weighted average.	Issuers can use the premium submitted in the enrollment XML (also included in the RADVEE Report) for each enrollment period in the enrollment period category of the RARSD Report to calculate the average premium according to the element definition for members in the stratum as identified in the RADVDE Report.
Stratum Indicator Category	Total Premium Amount	totalPremiumAmount	Total premium amount paid in the payment year for all enrollment periods in the stratum of the sample. The paid amount for each enrollment period is calculated by multiplying the monthly premium by the number of member months of the enrollment period within the payment year. Note: Non-subscriber enrollment periods do not contribute to the total premium amount.	Issuers can use the premium submitted in the enrollment XML (also included in the RADVEE Report) for each enrollment period in the enrollment period category of the RARSD Report to calculate the total premium according to the element definition for members in the stratum as identified in the RADVDE Report.

RADVIVAS Report Category	RADVIVAS Business Element Name	RADVIVAS XML Element Name	ICD Element Description	Validation Notes
Stratum Indicator Category	Total Claims	totalClaim	Total active, RA eligible medical claims for all enrollees in the defined strata of the sample.	The Total Claims count should match the total number of claims in the RADVMCE Report for all enrollees in the stratum as identified in the RADVDE Report.
Stratum Indicator Category	Total Plan Paid Amount	totalPlanPaidAmountFile	Total amount paid for all active, RA eligible claims for all enrollees in the defined strata of the sample.	The Total Plan Paid Amount should *match the total paid amount for claims in the RADVMCE Report for all enrollee in the stratum, as identified in the RADVDE Report. *Please note there is a system issue in which a claim's paid amount is double counted if the enrollee has overlapping coverage for the same 16-digit plan ID on the day of the Statement Covers From date of the claim.
Stratum Indicator Category	Total Number of Diagnoses Codes	totalNumberDiagnosisCodes	Total number of Diagnosis Codes for all enrollees in the defined strata of the sample contained on RA eligible claims. Duplicate codes are counted for an individual enrollee.	The Total Number of Diagnosis codes can be calculated by adding up the diagnosis codes found on the RADVMCE Report for all enrollees in the stratum as identified in the RADVDE Report.
Stratum Indicator Category	Total Number of RA Diagnoses Codes	totalNumberRADiagnosisCodes	Total number of RA Diagnosis Codes that map to an HCC for all enrollees in the defined strata of the sample contained on RA eligible claims. Duplicate codes are counted for an individual enrollee.	The Total Number of RA Diagnoses Codes is the Total Number of Diagnoses Codes for all enrollees in the stratum as identified in the RADVDE Report which map to an HCC (before the hierarchy is imposed).
Stratum Indicator Category	Total Number of HCCs	totalNumberOfHCCs	Total number of HCCs (prior to the hierarchy being imposed) de-duplicated for each enrollee within the strata of the sample.	The Total Number of HCCs (before the hierarchy is imposed) value will be less than or equal to the Total Number of HCCs value for the corresponding stratum in the RADVPS Report.
Stratum Indicator Category	Total Number of Unique Diagnosis Codes	totalNumberUniqueDiagnosis	Total number of Diagnosis Codes, de-duplicated for enrollee in the defined strata of the sample contained on RA eligible claims. Duplicate codes are only counted once for an individual enrollee.	This element should match the sum of the total diagnosis codes in the RADVDE Report (totalNumberUniqueDiagnosisCodes) for each enrollee in the stratum.
Stratum Indicator Category	Total Number of Unique RA Diagnosis Codes	totalNumberUniqueRADiagnosis	Total number of RA Diagnosis Codes, de-duplicated for each enrollee, that map to an HCC for all enrollees in the defined strata of the sample contained on RA eligible claims. Duplicate codes are only counted once for an individual enrollee.	This element should match the sum of the total RA diagnoses codes in the RADVDE Report (totalNumberRADiagnosisCodes) for each enrollee in the stratum.

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3 Appendix

Table 2: Acronyms

Acronym	Literal Translation
CC	Condition Category
CEFR	Claim and Enrollee Frequency Report
CMS	Centers for Medicare & Medicaid Services
CSR	Cost-sharing Reduction
DOB	Date of Birth
Dx	Diagnosis
ECD	Enrollee (Without) Claims Detail
ECS	Enrollee (Without) Claims Summary
EDGE	External Data Gathering Environment
FFM	Federally-facilitated Marketplace
HCC	Hierarchical Condition Category
ICD	Interface Control Document
IVA	Initial Validation Audit
RA	Risk Adjustment
RACSD	Risk Adjustment Claim Selection Detail Report
RACSS	Risk Adjustment Claim Selection Summary Report
RADV	Risk Adjustment Data Validation
RADVDE	Risk Adjustment Data Validation Detail Enrollee Report
RADVEE	Risk Adjustment Data Validation Enrollment Extract Report
RADVIVAS	Risk Adjustment Data Validation Initial Validation Audit Statistics Report
RADVMCE	Risk Adjustment Data Validation Medical Claim Extract Report
RADVSE	Risk Adjustment Data Validation Supplemental Extract Report
RADVPS	Risk Adjustment Data Validation Population Summary Statistics Report
RARSD	Risk Adjustment Risk Score Detail Report
RARSS	Risk Adjustment Risk Score Summary Report
REGTAP	Registration for Technical Assistance Portal
XML	eXxtensible Markup Language