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



## **CENTER FOR MEDICARE**

**DATE:** October 29, 2021

**TO:** All Medicare Advantage Organizations, PACE Organizations, Medicare-

Medicaid Plans, Section 1833 Cost Contractors and Section 1876 Cost

Contractors, Demonstrations, and PDPs

**FROM:** Jennifer R. Shapiro, Director, Medicare Plan Payment Group

**SUBJECT:** Updates to Payment Year (PY) 2022 Model Output Reports

CMS distributes two Model Output Data Files – one for Part C and one for Part D. Within the data files, there are Model Output Reports (MORs) with unique record types that correspond to each model being run for payment. We distribute these MORs to plans to identify the Hierarchical Condition Codes (HCCs) used to calculate risk scores for each of their enrolled beneficiaries. This memo provides information regarding changes to the MORs that will be generated for the PY 2022 initial, midyear, and final reconciliation payments.

For PY 2022 (2021 dates of service), for non-PACE (i.e., Part C non-ESRD, ESRD dialysis and functioning graft, and Part D) risk scores, CMS will end the blending of encounter data-based and RAPS-based risk scores and move to calculating 100 percent of the risk score using diagnoses from MA encounter data and FFS claims. For PACE risk scores, we will continue to pool risk adjustment eligible diagnoses to calculate a single risk score (with no weighting) from RAPS data, encounter data, and FFS claims. The PY 2022 risk adjustment models are described below<sup>1</sup>:

- For Part C non-PACE risk scores for PY 2022, CMS will continue to use the 2020 CMS-HCC model to calculate 100 percent of the risk score.
- For Part D non-PACE risk scores for PY 2022, CMS will use the new 2022 RxHCC model to calculate 100 percent of the risk score.
- For ESRD (non-PACE) risk scores for PY 2022, CMS will continue to use the 2020 ESRD model to calculate 100 percent of the risk score.
- For PACE risk scores for PY 2022, we will continue to calculate the Part C risk scores using the 2017 CMS-HCC model, the ESRD risk scores using the 2019 ESRD model for ESRD scores, and the Part D risk scores using the 2020 RxHCC model.

<sup>&</sup>lt;sup>1</sup> Policies proposed and finalized in the 2022 Advance Notice and Rate Announcement: <a href="https://www.cms.gov/Medicare/Health-Plans/MedicareAdvtgSpecRateStats/Announcements-and-Documents.html">https://www.cms.gov/Medicare/Health-Plans/MedicareAdvtgSpecRateStats/Announcements-and-Documents.html</a>

For PY 2022, CMS will continue using the same record types for encounter data and FFS based HCCs and for PACE organizations as we used in PY 2021. Note that because RAPS will not be used in non-PACE risk scores, the MOR Record Types for RAPS and FFS Based HCCs (Record types E (ESRD and ESRD Post Graft), D (CMS-HCC Aged/Disabled (non-PACE and non-ESRD), and 2 (RxHCC) will not be issued. The record types for PY 2022 are outlined as follows:

Table 1. Record Types and Model Versions for Payment Year 2022

2022 Model Run Data Source	Model	Model Version	MOR Record Type
MOR Record Types for Encounter Data and FFS Based HCCs	ESRD and ESRD Post Graft	V21	G
	CMS-HCC Aged/Disabled (non-PACE and non-ESRD)	V24	J
	RxHCC	V05	4
MOR Record Types for PACE Organizations (RAPS, FFS, and Encounter Data)	PACE-ESRD	V21	В
	PACE CMS-HCC (non- ESRD)	V22	K
	RxHCC	V05	5

The Plan Communications User Guide (PCUG, <a href="https://www.cms.gov/Research-Statistics-Data-and-Systems/CMS-Information-">https://www.cms.gov/Research-Statistics-Data-and-Systems/CMS-Information-</a>

<u>technology/mapdhelpdesk/Plan\_Communications\_User\_Guide.html</u>) has been updated to reflect the MOR record layouts that will be used in PY2022.

Questions related to this guidance should be submitted to <a href="riskadjustmentoperations@cms.hhs.gov">riskadjustmentoperations@cms.hhs.gov</a>. Please use "HPMS Memo – Updates to Payment Year (PY) 2022 Model Output Report" as the subject in all communications regarding this guidance. Thank you.