

Medicare Part C & Part D Data Validation Audits

Medicare Part C and D Data Validation Audits (DVA) are required by regulations (42 CFR 422,516, 422.514, CMS-4085-F) implemented by the Centers for Medicare and Medicare (CMS).

To ensure the independence of the Data Validation, organizations cannot use their staff to conduct the Data Validation. Instead, Medicare Advantage Organization (MAO) and Part D sponsors are required to contract with independent external data validation auditors to review the process and data that is reported to CMS.

By leveraging our extensive experience, we offer a Medicare Part C and Part D Data Validation Contractor Audit program.

CODY's team has:

- Thorough understanding of Part C and Part D reporting requirements and technical specifications
- Subject matter expertise related to: Title I and II of the Medicare Modernization Act (MMA), Medicare Part C and Part D regulations, Medicare Managed Care Manual and Prescription Drug Benefit Manual
- Experience in conducting internal audits for various business operations including functions related to Medicare enrollment/disenrollment, grievance and appeals, etc.
- Extensive experience in reviewing systems and processes, including systems for claims, enrollment, provider data, grievance and appeals, pharmacy data, etc.
- Over 8 years of experience with source code review; includes developing and reviewing complex source code for performance reporting for Medicare Organizations
- Thorough knowledge of various software programs and query languages including, SQL, SAS, Brio, Crystal reports, Cognos, MS Access, Excel, etc.
- Experience in statistical analysis

In addition, all Health Plan data is housed in SSAE-16 and HITRUST certified servers, which demonstrates a high level of compliance with HIPAA and the HITECH Act. CODY's staff is continually updated, knowledgeable about HIPAA Compliance, and has active monitoring tools in place. Protecting your data is a top priority.

CODY's team has the background and skills necessary to assess Data Validation standards successfully. We have worked with clients of all sizes, from new start-ups to some of the largest Medicare managed care organizations in the country.

A core audit team is assigned to each audit to serve as the primary reviewer. For source code review and census/sample validation, additional CODY[®] resources are also included in the audit review team. Access to additional staff expertise allows for efficient completion of documentation review and responses to your communications throughout the process.

CODY[®] is committed to involve clients throughout the process and keep them informed of any possible findings. A regular issue log, timeline, and status of key deliverables are shared to help clients manage expectations as well as highlight any concerns regarding documentation submitted and reviewed. There will be no surprises on the final report. CODY[®] conducts all Data Validation reviews in an open, efficient, and reassuring manner.

Data Validation clients can expect the following in our service:

- Kick-off Data Validation Webinar to ensure transparency and agreement with the process
- Review and feedback of the Organizational Assessment Instrument
- Source Code Review
- Full Census File Review/Recalculation
- Onsite or virtual meeting with Primary Source Verification
- Ongoing tracking of issues, deliverables, and plan review of draft findings prior to CMS submission
- Final Validation Report and Work Papers
- Ad-hoc Webinars and/or Teleconferences as needed to facilitate the Audit Process

To learn more about CODY's Data Validation services, or to request a proposal please contact us at sales@codyconsulting.com.