

MVP FASTFAX

News for West Region – Rochester/Buffalo Providers

ACA HHS - OPERATED RISK ADJUSTMENT VALIDATION AUDIT

The Affordable Care Act (ACA) and the Department of Health and Human Services (HHS) requires MVP Health Care to participate annually in an audit to validate diagnosis codes reported on claims. As such, MVP Health Care's Risk Adjustment Team may be reaching out to your office to request medical records.

The audit will consist of two parts. First, is to validate demographics by conducting an independent validation of enrollment and claims data that were used in risk adjustment calculations. Second, is to assess the accuracy of enrollee risk scores through medical record review.

For the purposes of HHS-RADV (Risk Adjustment Data Validation), medical record documentation means any clinical documentation of hospital inpatient, outpatient treatment, or professional medical treatment from which enrollee health status is documented and related to accepted RA services that occurred during a specified period of time.

If MVP Health Care contacts your office to request a medical record for one of our members, we ask that you comply as quickly as possible. Medical records can be supplied to us either via Right Fax Server, US Mail, FedEx, etc.

**Questions? Please contact the Customer Care Center for
Provider Services. Representatives are available weekdays from
8:30 am – 5:00 pm 1-800-684-9286**

