

Date: May 1, 2023

To: Hospitals, Physicians, and Practitioner Health Care Providers

From: Elizabeth Parish
Director, Payment Policy & Financial Management Group
Center for Consumer Information & Insurance Oversight
Centers for Medicare & Medicaid Services

Re: Medical Record Requests for the HHS Risk Adjustment Data Validation Program (HHS-RADV)

SPECIAL NOTE: DO NOT SEND MEDICAL RECORDS TO CMS. Please follow the instructions provided by the requestor.

On behalf of the Secretary of the Department of Health and Human Services (HHS), the Centers for Medicare & Medicaid Services (CMS) is responsible for annually validating the accuracy of risk adjustment data submitted by a health insurance company with ACA risk adjustment covered plans in the individual and small group health insurance markets through the validation of medical records for States where HHS operates the ACA risk adjustment program.¹ This process is known as the HHS-operated Risk Adjustment Data Validation (HHS-RADV) program.

As part of the HHS-RADV program, please find attached a medical record request from a health insurance company or its delegated entity. It is important to respond to this request by the date in the medical record request letter.

The current HHS-RADV audit pertains to services provided during benefit year (BY)2022. The entity sending this request has determined that one or more of your patients is part of the HHS-RADV random sample audit and had services provided to them during BY 2022. Because BY 2022 HHS-RADV medical record review is time sensitive, **your immediate attention to this request is appreciated.**

These requests are applicable to all providers, whether or not the provider has a contractual agreement with the health insurance company.

Please provide the medical record(s) to the requestor. In accordance with CMS policies, do not forward any medical records to CMS or its contractors. Medical records received by CMS will be destroyed.

Thank you in advance for your prompt cooperation.

¹ Section 1343 of the Patient Protection and Affordable Care Act (ACA) (Pub. L. 111-148) established a permanent risk adjustment program. Consistent with Section 1321(c) (1) of the ACA, the Secretary is responsible for operating the program on behalf of any State that elected not to do so. For the 2022 benefit year, HHS operated the risk adjustment program in all 50 States and the District of Columbia.