

Appendix 1: Data Validation Standards

2010 (old version)	2013 (new version)	Type of Change	Reason for Change	Burden Change
The following reporting sections underwent data validation in Part C: Benefit Utilization, Procedure Frequency, Serious Reportable Adverse Events (SRAEs), Provider Network Adequacy, Grievances, Organization Determinations/Reconsiderations, Employer Group Plan Sponsors, Plan Oversight of Agents, and Special Needs Plan Care Management (SNPs). The following reporting sections underwent data validation in Part D: Retail, Home Infusion, and Long Term Care Pharmacy Access, Medication Therapy Management Programs (MTM), Grievances, Coverage Determinations and Exceptions, Appeals, Long-Term Care Utilization, Employer/Union Sponsored Group Health Plan Sponsors, and Plan Oversight of Agents. Therefore, a total of 9 reporting sections in Part C underwent the data validation and 8 reporting sections in Part D underwent the data validation.	For 2013, the following Part C reporting sections will undergo data validation: SRAEs-2012 and 2013, Grievances, Organization Determinations/Reconsiderations, SNPs-2012 and 2013. The following Part D reporting sections will undergo data validation: MTM, Grievances, Coverage Determinations and Exceptions, Redeterminations, and Long-Term Care Utilization. That is a total of 6 Part C reporting sections and 4 Part D reporting sections.	Rev	Reporting for a number of reporting sections was suspended between 2011 and 2014. This was due to the information being available elsewhere or a decision not to data validate if the reporting section was used for monitoring only.	Reduction
The number of data elements for Part C grievances was 7. The number of data elements for Part D grievances was 10.	The number of data elements for Part C grievances was 18, the same as Part D.	Rev	Users were of the opinion that more data elements were needed to adequately categorize types of grievances.	Increase. This was due to more standards being validated due to an increase in data elements.
The number of data elements for Coverage and Exceptions was 10.	The number of data elements is 28.	Rev.	Increase in data elements was needed to get better use out of this reporting section.	Increase. This was due to more standards being validated due to an increase in data elements.
Reporting section was called "Appeals".	"Appeals" was changed to "Redeterminations".	Rev.	This new term is more consistent with current usage.	None

Type of Change: Rev = Revision, Del = Deletion, Add = Addition, and Red = Redesignation.

Appeals had 3 data elements.	The number of data elements in Appeals increased from 3 to 12.	Rev.	Increase in data elements was needed to get better use out of this reporting section.	Increase. This was due to more standards being validated due to an increase in data elements.

Appendix 2: Organizational Assessment Instrument

2010 (old version)	2013 (new version)	Type of Change	Reason for Change
No "List Of Tables"	"List of Tables" included	Revision	Facilitate review of document
9 Part C and 8 Part D sections undergoing data validation	Reduction in 'Reporting Sections' undergoing data validation fo 4 Part C sections and 5 Part D sections	Revision	Suspension of some Part C and Part D reporting sections.

Burden Change
No
Decrease. Fewer reporting sectionsinvolved in the organizational assessment.

Appendix 3: Data Extraction and Sampling Instructions

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Appendix 4: Instructions for Findings Data Collection For

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Appendix 5: Findings Data Collection Form

2010 (old version)	2013 (new version)	Type of Change	Reason for Change
"MSC" refers to "measure Specific Criteria."	"MSC" is replaced by "RSC" to refer to "Reporting Section Specific Criteria."	Rev.	To be consistent with term change that was adopted: "Measure" was replaced by "Reporting Section."
The following reporting sections underwent data validation in Part C: Benefit Utilization, Procedure Frequency, Serious Reportable Adverse Events (SRAEs), Provider Network Adequacy, Grievances, Organization Determinations/Reconsiderations, Employer Group Plan Sponsors, Plan Oversight of Agents, and Special Needs Plan Care Management (SNPs). The following reporting sections underwent data validation in Part D: Retail, Home Infusion, and Long Term Care Pharmacy Access, Medication Therapy Management Programs (MTM), Grievances, Coverage Determinations and Exceptions, Appeals, Long-Term Care Utilization, Employer/Union Sponsored Group Health Plan Sponsors, and Plan Oversight of Agents. Therefore, a total of 9 reporting sections in Part C underwent the data validation and 8 reporting sections in Part D underwent the data validation.	For 2013, the following Part C reporting sections will undergo data validation: SRAEs-2012 and 2013, Grievances, Organization Determinations/Reconsiderations, SNPs-2012 and 2013. The following Part D reporting sections will undergo data validation: MTM, Grievances, Coverage Determinations and Exceptions, Redeterminations, and Long-Term Care Utilization. That is a total of 6 Part C reporting sections and 4 Part D reporting sections.	Rev	Reporting for a number of reporting sections was suspended between 2011 and 2014. This was due to the information being available elsewhere or a decision not to data validate if the reporting section was used for monitoring only.

Burden Change
None
Reduction