

2018 (old version)	2019 (new version)	Type of Change	Reason for Change	Burden Change
Medicare Part C Technical Specification Document	Changed title of document to Medicare Part C Reporting Requirements	Update	Title is more accurate since the technical specifications for Part C Reporting will be put in a separate document to enable CMS to update based on real time feedback from MA Plans through the Part C mailbox.	No change
References to Benefit Utilization, Procedure Frequency, Serious Reportable Adverse Events, and Provider Adequacy	Deleted	Update	Reporting sections suspended in previous years.	No change
Grievance Category - Enrollment/Disenrollment	Deleted	New	Data collection is no longer necessary for monitoring purposes.	Decrease
Grievance Category - Plan Benefit Grievances	Deleted	New	Data collection is no longer necessary for monitoring purposes.	Decrease
Grievance Category - Access Grievances	Deleted	New	Data collection is no longer necessary for monitoring purposes.	Decrease
Grievance - Category - Marketing Grievances	Deleted	New	Data collection is no longer necessary for monitoring purposes.	Decrease
Grievance Category - Customer Service Grievances	Deleted	New	Data collection is no longer necessary for monitoring purposes.	Decrease
Grievances Category - Organization /Retermination/ Reconsideration Process Grievances	Deleted	New	Data collection is no longer necessary for monitoring purposes.	Decrease
Grievance Category -Quality of Care	Deleted	New	Data collection is no longer necessary for monitoring purposes.	Decrease
Grievance Category - Grievances Related to "CMS Issues"	Deleted	New	Data collection is no longer necessary for monitoring purposes.	Decrease

Grievance Category - Other Grievances	Deleted	New	Data collection is no longer necessary for monitoring purposes.	Decrease
Organization Determination /Reconsideration Reporting Section	Data Elements Changed from Numbers to Letters	Update	To be consistent with Part D Reporting	None
Organization Determination (O/D) Totals - Data Element 6.2	Deleted	New	Elimination of timeliness requirement for O/D totals to be consistent with Part D Reporting	Decrease
N/A	Reporting O/D Totals Initiated by Enrollee/Representative and Provider for all Claims and Services under Subsection #1, Data Elements D-G	New	To learn more information about who is submitting the request for O/D.	Increase
O/D - Data Elements 6.3 - 6.9 - Totals for all Services and Claims resulting in a fully favorable, partially favorable or adverse disposition.	O/D --Subsection #2, Data Elements A-L, Disposition - All O/D - Totals for all services and claims resulting in a fully favorable, partially favorable or adverse disposition are reported by contract and non-contract providers.	New	To learn more information about whether the service or claim is being provided by a contract or non-contract provider.	Increase
ODR - Reconsiderations - Data Elements 6.12-6.18 - Totals for Reconsiderations for claims and services	ODR - Reconsiderations. Totals for all reconsideration for claims and services now categorized by Enrollee/Representative or Provider under subsection #3 Data Elements D-G.	New	To learn more information about who is submitting the request for Reconsiderations.	Increase
Mid-Year Network Changes	Suspended	New	Data that has not been used and will enable CMS agency focus on other reporting sections.	Decrease
Private Fee For Service Provider Payment Dispute Resolution Process	Suspended	New	Most of the Issues related to this reporting section have been addressed, and number of plans participating in this reporting sections have diminished significantly.	Decrease
MMPs	MMPs will no longer required to report data specific to ODR and Grievances under Part C reporting.	Update	Streamline existing reporting requirements for MMPs.	No change

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