Anthem Blue Cross

CMS Selects Anthem Blue Cross for 2016 National RADV Audit

Anthem Blue Cross has been selected by the Centers of Medicare & Medicaid Services (“CMS”) to participate in the 2016 National Risk Adjustment Data Validation (“RADV”) Audit. As part of CMS Medicare Advantage requirements, Anthem is required to report all member diagnosis data to CMS. The purpose of the RADV Audit is to verify payment accuracy to [Brand Name] based on diagnosis data reported to CMS. This year’s RADV Audit covers all 2015 dates of service for those Medicare Advantage members.

Audit Period. The audit process began on February 21, 2018 and will end 16 weeks later at midnight on June 13, 2018.

What is the process? In order to verify the accuracy of the previously reported diagnosis data, CMS requires that Medicare Advantage Organizations submit medical records that support and validate the diagnosis data for the audited members. Anthem will be using a contracted vendor, Verscend, to request the medical records from hospital and physicians that treated the audited members during the audited calendar year. Note: Another vendor, Inovolan, will be used to request medical records from out-of-area providers. A dedicated audit team will review the medical records collected to ensure that they support the diagnosis data previously reported to CMS and will oversee the record submission process. Our record retrieval and validation efforts will conclude when medical records for each audited member have been submitted to CMS.

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