

CMS Selects Amerigroup for 2016 National RADV Audit

Amerigroup 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, Amerigroup 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. Amerigroup 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.

71582MUSENMUB 03/21/18

Coverage provided by Amerigroup Inc.

In New Jersey, Amerivantage dba Amerigroup Community Care. In New Mexico, Amerigroup Community Care of New Mexico, Inc. In Texas, Amerigroup members in the Medicaid Rural Service Area are served by Amerigroup Insurance Company; all other Amerigroup members are served by Amerigroup Texas, Inc. In Tennessee, Amerigroup Tennessee Inc. dba Amerigroup Community Care. In Washington, Amerigroup Washington, Inc.