

INTRODUCING THE STARS QUALITY ASSURANCE PROCESS FOR PART D ENROLLMENT OUTCOMES

- AKIA U. DIEUSEUL & MELISSA SIMPSON (ACL)
- SARAH FLEMING, GINNY PAULSON & DENNIS SMITHE (SHIP TA CENTER)

February 2021

Agenda

- Part D Enrollment Outcomes (PDEO) Overview
- PDEO Quality Assurance (QA) Process
- Demonstration
- STARS Resources
- Questions



PART D ENROLLMENT OUTCOMES (PDEO)

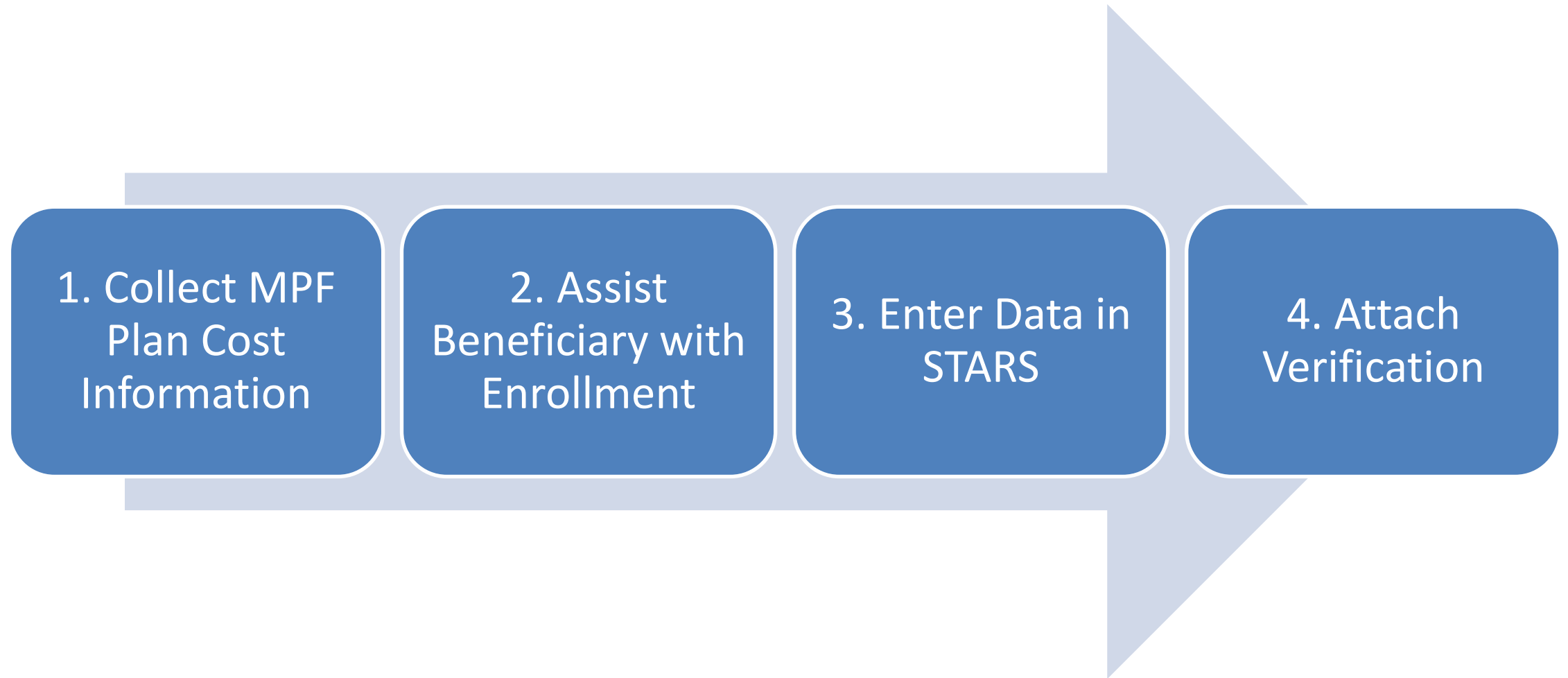
PDEO Overview

ACL uses STARS to collect data related to the cost changes as result of enrollment in Part D prescription drug plans (PDPs) and Medicare Advantage plans with prescription drug coverage (MA-PDs) available through the Medicare Plan Finder (MPF).

By collecting this data, SHIPs can demonstrate the impact of their work on behalf of beneficiaries in three ways:

1. Data on the **number of beneficiaries** who received PDP/MA-PD enrollment assistance from SHIPs;
2. Data on the **average cost change per beneficiary** who received PDP/MA-PD enrollment assistance from SHIPs;
3. Data on the reported **total of PDP/MA-PD cost change for each state.**

PDEO Data Reporting Steps





PDEO QUALITY ASSURANCE (QA)

Reports in Configuration Tab



1. PDEO Aggregate Reports

- Summarizes cost change by plan type, New to Medicare, 150% FPL for exported after QA Attestation
- National, State, Substate/Site, and Team member
- Must conduct QA and attest prior to publicly sharing data

2. Quality Assurance Review Report (PDEO QA)

- Two worksheets: (1) Valid and (2) Flagged
- Necessary details to locate and review records/contacts
- National, State, and Substate/Site
 - State level recommended for semi-annual QA process



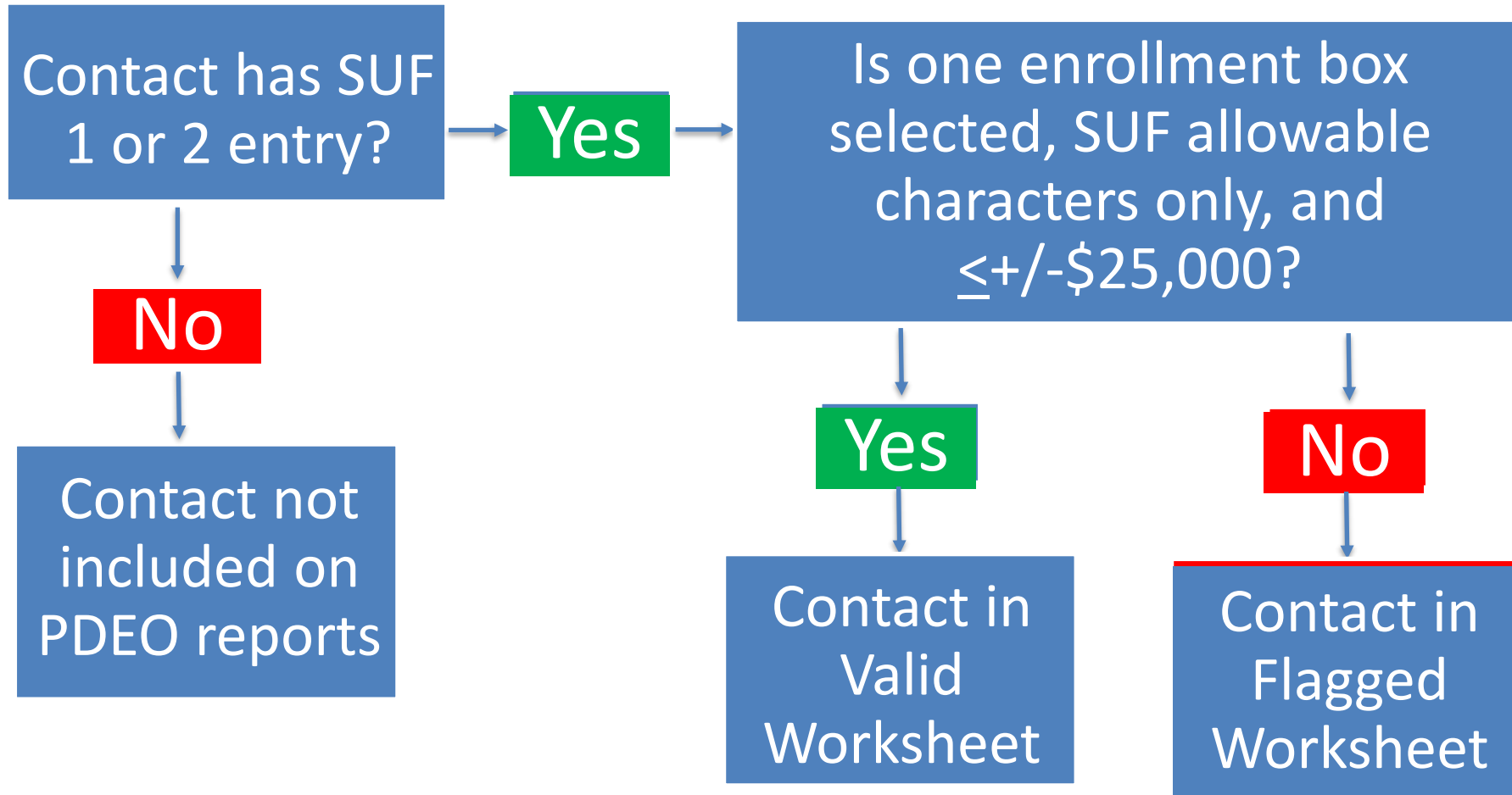
89,664 PDEO Records Jul.-Dec. 2020



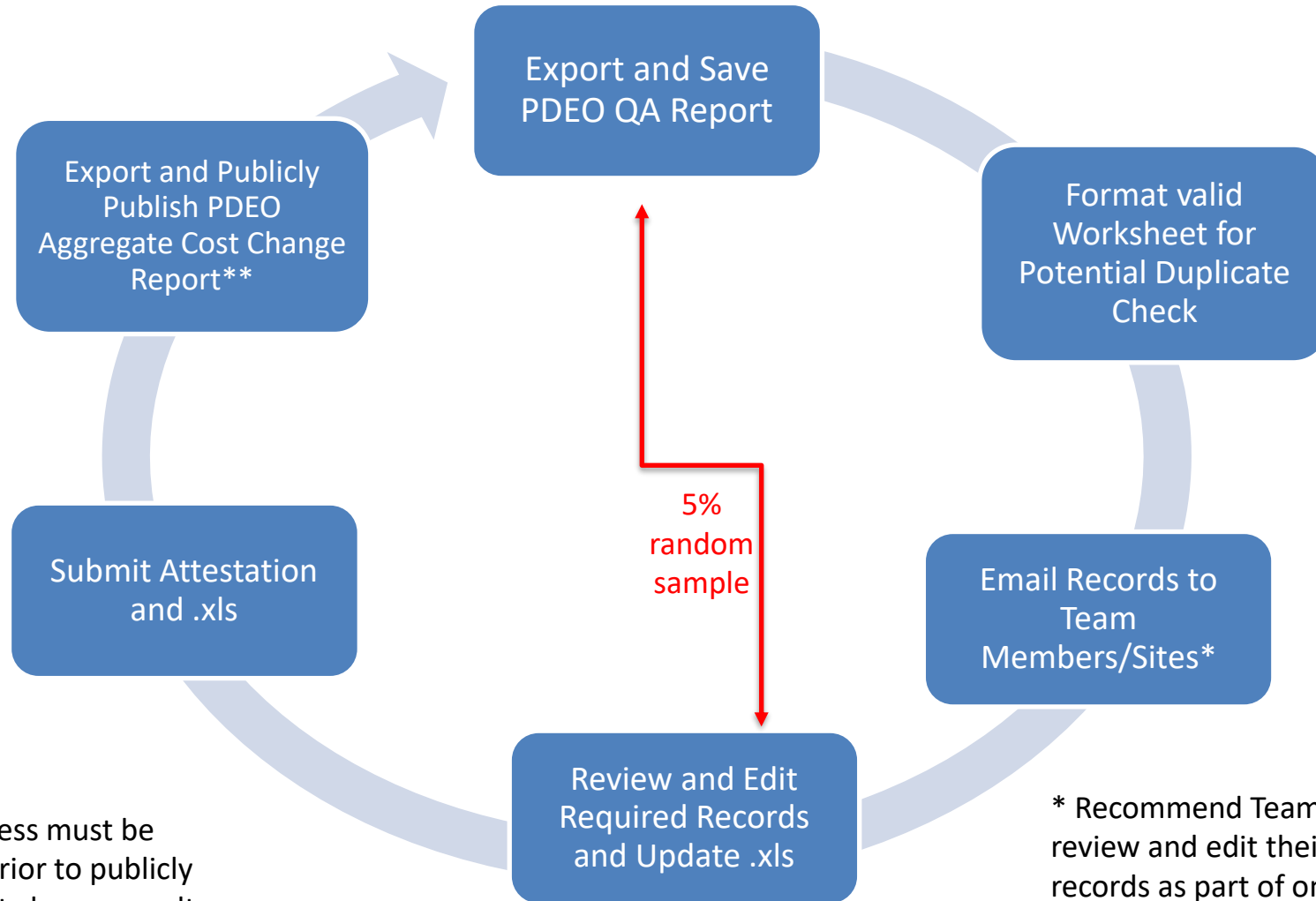
77% Valid (71,129)	20% Flagged (18,535)	
One PDP or MA-PD Enrollment Box Checked + Numeric Data in SUF 1 and 2	Two Enrollment Boxes	2%
	No Enrollment Box	8%
	Non-numeric SUF 1 or 2	27%
	SUF 1 empty (Original Cost)	6%
	SUF 2 empty (New Cost)	15%
	Cost Change \geq +/- \$25,000	3%
	\$0 Cost Change*	43%
7-week Records (573/2,819)*	34%	

* 7-week logic and \$0 calculated cost change do not necessarily indicate an error.

PDEO QA Report Contact Logic



Quality Assurance Process



** QA Process must be complete prior to publicly sharing cost change results.

* Recommend Team Members review and edit their own records as part of ongoing training.

QA Required Record Review

Valid

Potential Duplicates

5% Randomly Selected

All when < 20 records

Flagged

All Records

Exception = unrelated 7-week records

Locate records in STARS. Review records and place an “x” in appropriate column indicating:

- Record has been reviewed is complete (verification document available, cost amounts accurate, enrollment occurred)
- Location of verification documentation (in or outside STARS)
- Record incomplete and cost data removed from SUFs (no enrollment occurred, no verification documentation)
- Record should be deleted, must add column V to worksheet

QA Process Semi-Annual Cycles

Semi-Annual #1

February: Export QA Report with Jul.-Dec. Data

Review and Update Records Feb.-Mar.

Attestation and .xls Due March 31

SHIPs should submit Semi-Annual #1 by April 30 for the first 2021 QA Process.

Semi-Annual #2

August: Export QA Report with Jan.-Jun. Data

Review and Update Records Aug.-Sept.

Attestation and .xls Due Sept. 30

Grantees may conduct more frequent QA Report Review cycles. Be sure to save the QA Report .xls to submit with Attestation requirements.

Submitting to ACL

- Grantees should submit their PDEO Attestation form and complete PDEO QA Review Report Microsoft Excel files to the SHIP mailbox at SHIP@acl.hhs.gov
 - This form must be completed by the SHIP Director
- SHIPs who do not complete the PDEO QA process will not be able to use the PDEO Aggregate Reports to report Part D Enrollment Outcomes data to anyone outside of ACL OHIC. In addition, their data will not be included in the National PDEO Aggregate Report.

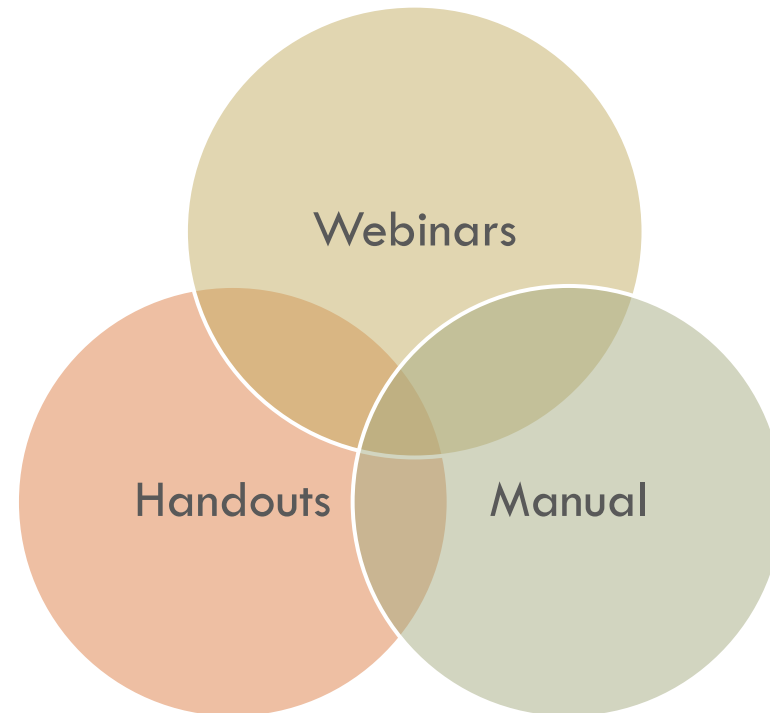
QA Frequent Questions and Feelings

- Record check timing and required number
 - 5% as random sample ≤ 20 , review all
- High cost change records +/- \$25,000
- First Semi-annual #1 deadline: April 30
- Enhancement requests: add Column V (delete), revise 7-week logic, others you identify to ohic@acl.hhs.gov
- Reminders
 - Interchangeable terms: records or contacts; Original Cost (SUF 1) and New Cost (SUF 2); valid and flagged worksheet or tab
 - QA Report inability to identify duplicates
 - QA report cost changes will not exactly match Aggregate Report
 - QA report looks first for a value in SUF 1 (API records with 0 populate)

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STARS Demonstration

Sarah Fleming, SHIP TA Center



Summary of Related Resource Updates

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New Chapter 7 of the STARS Manual

- **Part D Enrollment Outcomes: Data Entry, Quality Assurance, and Reports**
 - Collects all aspects of measuring these outcomes into one chapter

Revised Chapter 4 of the STARS Manual

- **Beneficiary Contacts**
 - Part D Enrollment Outcome details removed; references to Chapter 7 added

New Director Attestation Form

- **Part D Enrollment Outcomes Quality Assurance Attestation for State Health Insurance Assistance Program (SHIP) Directors**
 - Email with completed Microsoft Excel spreadsheet to SHIP@acl.hhs.gov

STARS Resources Kit

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What is STARS?

The State Health Insurance Assistance Program (SHIP) Tracking And Reporting System (STARS) is the nationwide, web-based data system that facilitates the reporting of SHIP and MIPPA grantee activities to the the Office of Health Care Information and Counseling (OHIC) at the Administration for Community Living (ACL).

- Go to STARS: <https://stars.acl.gov>

STARS Resources Kit

The table below outlines all available STARS Resources, and the bulleted items are links to those resources in the library. You can also visit the library and filter for STARS Resources = Yes or conduct a keyword search.

Comprehensive STARS Manual

- [Six chapters available: system overview, definitions and guidance, step-by-step data entry instructions, searches](#)
- Reports chapter pending; see "Reports" below for STARS reports webinar training and handouts

Data Entry Training

- Webinars:
 - [Beneficiary Contacts - General](#)
 - [Beneficiary Contacts - MIPPA-Qualifying](#)
 - [Beneficiary Contacts with Part D enrollment cost changes](#)
 - [Group Outreach and Media Outreach](#)
 - [Team Member Form and Activity Forms](#)
 - [SIRS and STARS Training](#) (for co-trained Senior Medicare Patrol team members)
- Related Handouts:
 - ACL guidance for Special Use Fields in the Beneficiary Contact Form (see Chapter 4 of the STARS Manual or "Related Resources" below)
 - Examples: COVID, create MyMedicare account, Marx, opioid
 - [Cost change reporting guidance](#)
 - [Printable STARS Forms](#)
 - [Security Slick Sheet](#)
 - [User Roles Overview](#)
 - [Performance Measures At-A-Glance References](#)
 - [SIRS and STARS Tip Sheet](#)

STARS Manual and Other Resources

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STARS Manual:

- Chapter 1: Introduction
- Chapter 2: User Basics
- Chapter 3: Team Member Management
- Chapter 4: Beneficiary Contacts
- Chapter 5: Group and Media Outreach and Education
- Chapter 6: STARS Searches
- **NEW!** Chapter 7: Part D Enrollment Outcomes: Data Entry, Quality Assurance, and Reports

Forms, Handouts, Job Aids, and Webinars about:

- CMS Unique ID
- Director attestations (**New** PDEO QA Attestation added 2/25/2021)
- Performance measures
- STARS and SIRS tip sheet
- User roles overview



STARS Training Webinars

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Recent (and archived):

- June 2020 – STARS Reports
- July 2020 – MIPPA Reports
- September 2020 – Entering PDP and MA-PD Cost Changes
- November 2020 – Beneficiary Contact Forms
- November 2020 – Group Outreach & Media Outreach Forms
- November 2020 – MIPPA Beneficiary Contact Form
- November 2020 – Team Member & Activity Forms
- February 2021 - Introducing the STARS Quality Assurance Process for Part D Enrollment Outcomes

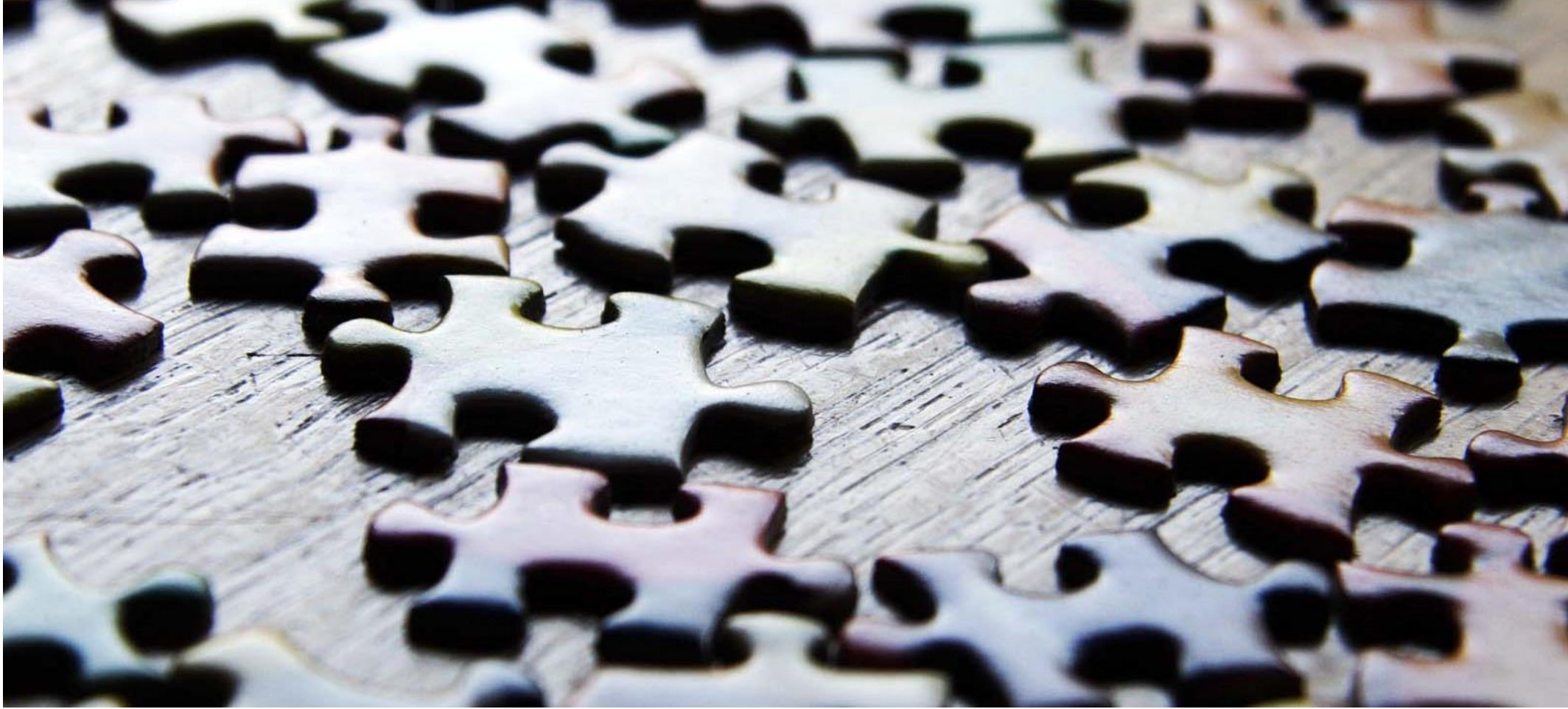
Individualized Technical Assistance

- For questions about **STARS training and resources** or technical assistance about complying with **ACL programmatic guidelines** for using STARS, contact the SHIP TA Center:
 - ▣ stars@shiptacenter.org or 877-839-2675
- For STARS technical assistance, contact the STARS help desk at Booz Allen Hamilton:
 - ▣ boozallenstarshelpdesk@bah.com or 703-377-4424

Questions?

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Thank you for attending!

This project was supported, in part, by grant number 90SATC0002 from the U.S. Administration for Community Living, Department of Health and Human Services, Washington, D.C. 20201. Grantees undertaking projects under government sponsorship are encouraged to express freely their findings and conclusions. Points of view or opinions do not, therefore, necessarily represent official Administration for Community Living policy. *[An Appendix follows.]*

4/7/2021



The following slides provide excerpted details about the QA process from the STARS Manual, Chapter 7

APPENDIX

Part D Enrollment Outcomes Quality Assurance Review Report

- Three types of PDEO contacts:
 1. Complete- SHIPs must verify contacts are complete through the PDEO QA Review process.
 2. Valid- requires review and may require edits.
 3. Flagged- must be reviewed and will require edits.
- The PDEO QA Review Report has two tabs/worksheets within the workbook, valid and flagged.
- Grantees will conduct a Standard Search in STARS to review PDEO contacts and edit, if needed.
- QA review and attestation required prior to public sharing of PDEO cost changes.

Complete Contacts

- One Enrollment box is checked (PDP or MA-PD);
- Numeric data is in Original and New Special Use Fields; and
- Verification documents including Medicare Plan Finder plan comparison and enrollment request are available as uploads in STARS or saved within the SHIP office as paper or electronic records.

Note: SHIPs will verify the location of the verification documents on the Valid and Flagged tabs of the PDEO QA Review Report in columns S or T.

Valid Contacts

- Definition
 - One Enrollment box is checked (PDP or MA-PD), and
 - Numeric data is in both the Original and New Special Use Fields.
- **Review the 5% random sample and potential duplicate contacts**
 - Random Sample- Identified in column R with a 5% symbol. It is important to save your workbook after pulling it from STARS, as the random sample changes each time it is retrieved.
 - If your state has less than 20 valid contacts, a random 5% sample will not appear, and all valid contacts must be reviewed.
 - Potential Duplicate Contacts- Grantees will use Excel Conditional Formatting to identify contacts
 - Enter an “X” in the appropriate column to verify: 5% review (column R), location of the documents (column S or T), contact is incomplete (column U), and/or record should be deleted (column V). When needed, contacts must be edited in STARS.

Potential Duplicate **Valid** Contacts

- Potential duplicate contacts may (or may not) need to be edited or deleted.
- Valid tab. If a potential duplicate contact is found to be **valid and not a duplicate**, determine:
 - If the beneficiary was enrolled in a plan for the *current year and the next year on the same date*, sum the total cost data and report them on the same contact form.
 - If the beneficiary was enrolled in a *plan for the current year and the next year on different dates*, keep them on separate forms.
 - If the beneficiary was enrolled in more than one plan for a future/next year, keep only the cost change associated with the latest enrollment date. The last plan enrollment is the plan that will become effective.

Flagged Contacts

- Definition
 - Data entered in the Original or New Cost field, and
 - One or more of the following issues that may require edits:
 - Both or neither PDP and MA-PD enrollment boxes are checked
 - Unallowed characters in one or both Special Use Fields (Original or New Cost)
 - One Special Use Field (Original or New Cost) is blank
 - Cost change is higher than \$25,000 or lower than -\$25,000
- All flagged contacts must be reviewed and edited in STARS.
 - Exception: 7-week flagged contacts must be reviewed only if the first and last name match and relate to a record within the selected date range. All others can be ignored.
- Enter an “X” in the appropriate column to verify: the contact has been reviewed (column R), the location of the documents (column S or T), the contact is incomplete (column U), and/or the record should be deleted (column V).

Potential Duplicate **Flagged** Contacts

- Potential duplicate contacts may (or may not) need to be edited or deleted.
- Two types of potential duplicates for review:
 1. Multiple contacts reported through BAS: If one or more BCF/BAS with the same SHIP Case/Reference Number (column B) are flagged, all contacts must be reviewed. They are grouped together in the flagged tab. One of the rows in the group will have green highlight in the exported file. Sorting and filtering contacts may separate groups.
 2. Potential duplicate contacts based on same first and last name: Grantees will use Excel Conditional Formatting to identify contacts with matching first and last name.
 - Review all potential duplicate contacts within and outside (7-week records) the date picker range you selected for the report
 - Ignore unrelated 7-week records outside the selected date picker range you selected for the report

Potential Duplicate **Flagged** Contacts

- If a potential duplicate contact is **not a duplicate**, determine:
 - If the beneficiary was enrolled in a plan for the *current year and the next year* **on the same date**, sum the total cost data and report them on the same contact form.
 - If the beneficiary was enrolled in a *plan for the current year and the next year* **on different dates**, keep them on separate forms.
 - If the beneficiary was enrolled in more than one plan for a future/next year, keep only the cost change associated with the latest enrollment date. The last plan enrollment is the plan that will become effective.

High Cost Change $\geq \$25,000$ or $\leq -\$25,000$

- Contacts that have cost changes higher than \$25,000 or lower than -\$25,000 will appear on the flagged worksheet.
- These flagged contacts will affect the PDEO Aggregate Report and must be reviewed.
- If enrollment occurred and cost data is correct, determine if the New to Medicare box also needs to be checked.
- If cost data is incorrect, make the necessary edits on the associated BCF or BAS form in STARS.
- If verifications are not available, cost data must be removed from the Original and New Cost Special Use Fields (SUF 1 and SUF 2).
- If the enrollment did not occur, uncheck the enrollment box.

Editing PDEO Contacts

- Use the SHIP Reference/Case Number in column B to conduct a Standard Search in STARS.
- Enrollment edits:
 - If PDP or MA-PD enrollment occurred, select the appropriate enrollment box. When needed, uncheck the incorrect enrollment box.
 - If enrolled in MA-only and a PDP, only check the PDP enrollment box.
 - If enrollment did not occur, uncheck enrollment box (remove SUF data).
- Original and New Special Use Field (SUF 1 or 2) edits:
 - Correct SUF 1 or 2 non-numeric characters
 - Complete SUF 1 or 2 when blank
 - Remove cost data from SUF 1 and 2 if no enrollment occurred or enrollment occurred but cost verification documents are not available.

Deleting Duplicate PDEO Contacts

- Duplicate contacts may need to be deleted.
- Only Directors are able to delete contacts.
- After pulling and saving your workbook, add a row header in column V. Write the word “Delete” in cell “V1” on the valid and flagged worksheets creating new columns to indicate a record needs to be deleted.
- Prior to deleting contacts, ensure all topics discussed and other notes captured on the form are reported and saved in STARS on the record being retained.
- If it is determined that a valid or flagged contact must be deleted, enter an “X” in column V for that contact.

Semi-Annual Reporting Periods

- Review contacts provided on the PDEO QA Review Report for the appropriate semi-annual reporting period:
 - July 1st – December 31st
 - PDEO Attestation form and complete PDEO QA Review Report Excel Workbook due by March 31st
 - For first review in 2021, April 30 is an extended due date
 - January 1st – June 30th
 - PDEO Attestation form and complete PDEO QA Review Report Excel Workbook due by September 30th
- Note- grantees may review contacts more often (ex. monthly), if desired. However, all worksheets must be saved into one workbook for submission.