
42 C.F.R. § 422.310

Risk adjustment data.

- (a) *Definition of risk adjustment data.* Risk adjustment data are all data that are used in the development and application of a risk adjustment payment model.
- (b) *Data collection: Basic rule.* Each MA organization must submit to CMS (in accordance with CMS instructions) the data necessary to characterize the context and purposes of each item and service provided to a Medicare enrollee by a provider, supplier, physician, or other practitioner. CMS may also collect data necessary to characterize the functional limitations of enrollees of each MA organization.
- (c) *Sources and extent of data.* (1) To the extent required by CMS, risk adjustment data must account for the following:
- (i) Items and services covered under the original Medicare program.
 - (ii) Medicare covered items and services for which Medicare is not the primary payer.
 - (iii) Other additional or supplemental benefits that the MA organization may provide.
- (2) The data must account separately for each provider, supplier, physician, or other practitioner that would be permitted to bill separately under the original Medicare program, even if they participate jointly in the same service.
- (d) *Other data requirements.* (1) MA organizations must submit data that conform to CMS' requirements for data equivalent to Medicare fee-for-service data, when appropriate, and to all relevant national standards. CMS may specify abbreviated formats for data submission required of MA organizations.
- (2) The data must be submitted electronically to the appropriate CMS contractor.
- (3) MA organizations must obtain the risk adjustment data required by CMS from the provider, supplier, physician, or other practitioner that furnished the item or service.

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