

MA RADV: Built By Auditors

END-TO-END AUDIT SUPPORT FOR MEDICARE ADVANTAGE HEALTH PLANS

With PY2020 underway and PY2021–2024 close behind, plans need an audit partner who can run multiple cycles concurrently. Below is the full scope of what we deliver, from audit notice through package creation and submission strategy.

Proven Across
the PY2019 Cycle

+10%

of all PY2019 Con-RADV
audited H-contracts
coded by Validira

+8%

net new HCCs
identified per PY2019
engagement

~98%

internal coding
accuracy, measured
in CY2025

From Audit Notice to Submission-Ready

1

Pre-Audit Planning & Rapid Launch

Engagement begins before the audit notice arrives. SFTP pathways, portal access, and coding guideline alignment are configured during planning. Upon receipt of audit data from the plan, Validira mobilizes coding within days, not weeks.

2

Chart Retrieval Through Our Partner Network

Validira can manage the full national medical record chase through our retrieval partner network. 98% retrieval rate across CY2025 clients using retrieval services, with attestation follow-up so no chart submits incomplete.

3

HCC Validation Coding

Every date of service, every HCC instance. Defensibility, not volume. Plans use the Validira coding guidelines or their own, on our NLP and AI-enabled platform that manages V22 through V28 simultaneously. Onshore or offshore coding at the plan's discretion, with onshore QA either way at 10% minimum on every chart.

4

Cycle Management Reporting

Always-on access to retrieval, coding, validation, and attestation status through a 24/7 web-based client portal, with Power BI-enabled custom views for filtering by provider, member, HCC, or whatever the team needs to see. Custom reports for stakeholders from chase teams to executives. Direct read-only access to the coding platform so plans can see exactly what coders found and how documentation was assessed.

5

Package Creation & Chart Selection Logic **NEW FOR PY21**

Guidance and logic-driven recommendations on which records to submit per HCC based on documentation strength, new HCC presence, and audit defensibility. Chart consolidation, page trimming, and CMS-formatted packages built based upon charts selected to submit. Submission sequence integrates with CMS upload workflows.

Real-Time Intelligence Built for Con-RADV Management

Four core reports refresh continuously throughout the audit, surfacing exactly what plans need to manage validation, close gaps, and assemble submissions.



Validation Status Reporting

HCCs validated per sampled enrollee, outstanding non-validated HCCs, and any new HCCs identified



Coding Strength Reporting

Validira's assessment of documentation strength within the record for each validated HCC



Signature Attestation Reporting

Identifies records where signature attestation is required



Package Assembly Reporting

Number of HCCs validated per chart, page ranges within the chart where each validated HCC appears, and presence of new HCCs

Built for MA RADV. Ready When You Are.

MA RADV is its own discipline. Every HCC on every date of service, with only two records submittable per HCC. Defensibility drives every selection.

Every engagement runs on weekly status meetings with the assigned team, real-time issue escalation, and hands-on service through every phase of the audit.

Kirk Martindale
VP, Data Audit Group

Elizabeth Nuñez
Sr. Director, Data Audit Group

Christine Carbonaro
Director, Coding Operations

"ATTAC has been a game-changer for us. They are agile, responsive, and willing to bend over backwards to provide us with what we need. Compared to past audit partners, the experience has been night and day. We only wish we had brought them on sooner."

— Plan Executive, Top 5 National Health Plan, MA RADV Client

CMS is ready.
Validira is ready.
Are you?

Contact Us to Learn More

inquiry@attaconsulting.com
(734) 214-2990 | attaconsulting.com