

January 2025

CMS to Conduct Audit to Identify Improper Medicare Advantage Payments

The Centers for Medicare and Medicaid Services (CMS) selected Florida Blue Medicare for the Part C Improper Payment Measure (Part C IPM) calendar year 2023 audit to ensure accurate risk-adjusted payments. While CMS conducts annual Part C audits, this Part C IPM audit is a routine, small sample audit that applies to BlueMedicareSM HMO and PPO Medicare Advantage members with **service dates of January 2022 – December 2022**.

As a result of this audit, Florida Blue may request medical records for your Florida Blue BlueMedicare HMO and PPO patients who are selected for the review.

Health Insurance Portability and Accountability Act Compliance

Florida Blue 💩 🖲

Your Health Solutions Partner

The collection of risk adjustment data and requests for medical records to validate payments to Medicare Advantage organizations complies with the Health Insurance Portability and Accountability Act (HIPAA) privacy provisions. Your patients will not need to authorize the release of risk adjustment data or medical record requests for this CMS audit.

If you have questions about the audit, please email us at <u>RPMchartprocurement@FloridaBlue.com</u>.

Florida Blue Medicare is an independent licensee of the Blue Cross and Blue Shield Association.