



Easily identify EDGE data discrepancies

Uncover potential lost revenue opportunities

In today's post-reform environment, data accuracy is more vital than ever. With risk scores driving Affordable Care Act (ACA) risk adjustment transfer payments, correct coding and data management are essential to issuers' bottom lines. Without clean and accurate EDGE data, proper coding practices and a systematic validation process, substantial transfers are at risk.

Issuers that want to dispute their risk adjustment and reinsurance calculations must embark on the painstaking process of validating their EDGE data, fixing any data issues on their end, identifying Centers for Medicare & Medicaid Services (CMS) discrepancies and then submitting formal discrepancy reports to CMS.

Our EDGE Server reporting solution can help you:

- Validate your EDGE data and prevent data discrepancies
- Prioritize impacts to risk adjustment
- Identify gaps in data
- Flag issues not otherwise identified
- Reconcile CMS calculations

To comply with the Affordable Care Act Premium Stabilization Risk Adjustment (RA) program, issuers offering small group and individual plans, both on and off exchange, must submit their data to an EDGE server. Data submissions are required to conform to the Dept of Health and Human Services' (HHS) EDGE server technical specifications and follow documented EDGE server Business Rules. Enrollment and claims data submitted to EDGE servers enables HHS to run reports against issuer's data and administer the Risk Adjustment (RA) and High Cost Risk Pool (HCRP) programs.

Complete EDGE data submissions and accurate risk scores are vital to a health insurance issuer's bottom line. Those that don't meet EDGE server requirements will face substantial penalties and lose premium dollars. An issuers' risk score—relative to the state market average, drives their risk- adjustment payment transfers: Issuers with lower than average risk make payment transfers into the program, funding payments made from the program to issuers with higher than average reported risk.

Truven offers comprehensive EDGE Services to ensure your successful participation the RA and HCRP programs.

Truven EDGE Server Solutions

Our services include data management setup and ongoing monthly data management.

Data Management Setup

With our data management setup services, we work with clients to:

- Establish a dedicated data environment
- Develop ETL (extract, transform, and load) programs conformant with HHS EDGE program specifications

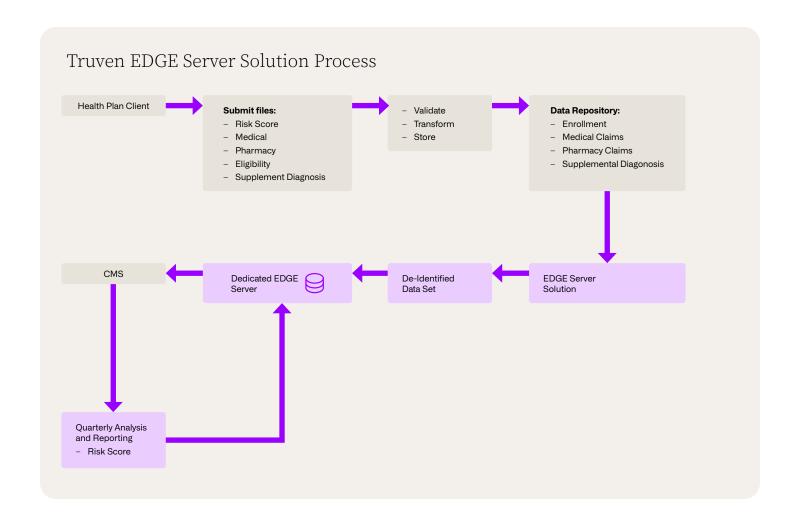
Our ongoing data management services include:

- Collect, format, and validate data to prepare for and ensure EDGE-ready submissions
- Aggregate medical, pharmacy, and enrollment data at the member level
- Load claims, enrollment and supplemental files to a EDGE dedicated server
- Support the test environment and respond to HHS requests
- Responding to HHS inquires regarding any data issues
- Receiving and reporting detailed and summary results to HHS and the issuer as required
- Running quarterly HHS risk-adjustment reports.
- Performing oversight and quality control

For All Your ACA Compliance Requirements, Turn to Truven:

- EDGE server TPA experts
- Risk adjustment program compliance

Learn more at merative.com/truven



About Truven

Truven by Merative is a portfolio of healthcare data and analytics solutions, backed by 40 years of deep healthcare expertise. We provide trusted insights and proven expertise to help employers, health plans, life sciences organizations, and government agencies drive better health and financial outcomes. With market-leading solutions like Health Insights and MarketScan, Truven serves 7 of the top U.S. health plans, over 40% of the Fortune 500, and the top 20 global pharmaceutical companies.

Learn more at merative.com/truven

@ Merative US L.P. 2024. All Rights Reserved. Produced in the United States of America June 2024 | MHI-4189229202 Rev 2.0