

The New Era of RADV: What Plans Must Do Now

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Speaker Introduction



Suzanne Barone

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Moderator

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Learning Objectives



Understand the expanding CMS RADV audit landscape



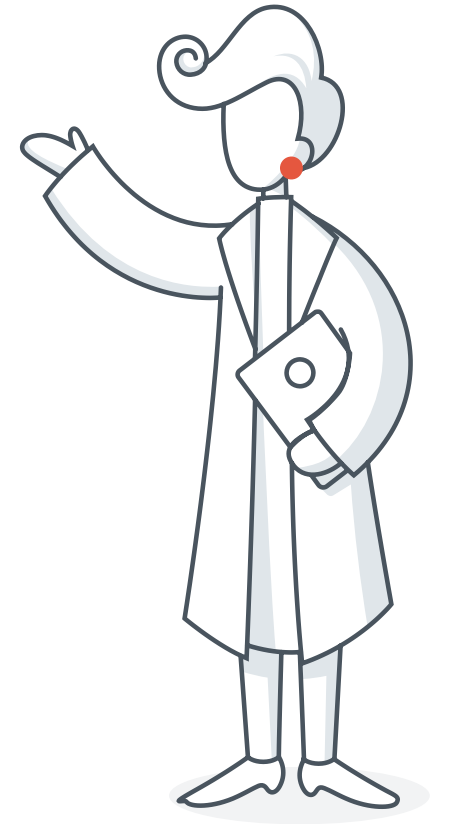
Recognize common challenges for MA plans and providers



Assess the operational and financial impacts of RADV audits



Apply best practices and engagement models to achieve year-round audit readiness



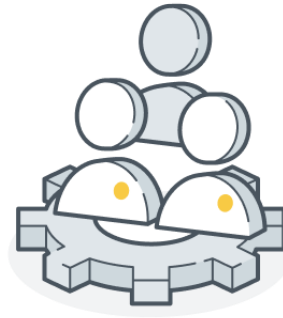
CMS RADV Audits: The New Reality

On May 21, 2025, CMS announced expanded aggressive timeframe to catch up on 6-year period (PY2019 – PY2024)¹.



Compressed timeframe

6-year lookback period completed by early 2026



Larger sample size

Increase from 35 to 200 members per audit



Expanded coverage

Every MA plan audited annually starting with PY2019

¹[CMS Press Release, May 21, 2025](#)

CMS RADV Audits: The New Reality

Metric	Previous Approach	New CMS Strategy ²	Change
Plans Audited Annually	~60 plans	All 550+ plans	+9X
Sample Size Per Plan	35 members	Up to 200 members	+6X
Audit Frequency	Sporadic selection	Every plan, every payment year	100% coverage
CMS Coding Staff	40 coders	2,000 coders (by Sept 1)	+50X
Extrapolation Applied	Limited to sample	All PY 2018+ audits	Universal
Submission time	20 weeks	12 weeks	-1.7x
Medical Record Support	5 per member HCC	2 per member HCC	-2.5x

²[Centers for Medicare & Medicaid Services](#). *Payment Year 2019 RADV Audit Methods and Instructions*. PDF, June 26, 2025.

CMS RADV Audits: Current Status & Timeline

PY2019 RADV audits initiated for **45 MAOs**.

PY2019 RADV audits initiated for **310 MAOs**.

CMS expands audit workforce to **2,000 coders**

Final deadlines to submit for PY2019 audits.

CMS targets **completion of all RADV audits** for PY2019–2024 backlog

5.21.25

6.12.25

6.16.25

6.25.25

9.01.25

9.15.25

9.29.25

Early 2026

CMS announces annual RADV audits for **all MAOs**.
(Medicare Advantage Organization)

Deadline for all closed period deletes for PY2020 risk adjustment data.
No extensions granted.

June 20 & July 7, 2025

Medical record submission for PY2019 audit samples opens.

June 23–July 15, 2025

Final deadlines for closed period deletes for PY2021–PY2024.

August 1 & 18, 2025

Hardship exception request deadlines for 1st and 2nd batch of PY2019 audits.

Polling Question

What has been your biggest RADV audit challenge for PY2018/PY2019?

- Record abstraction and coding accuracy
- Attestations and documentation requirements
- Retrieving records on time
- Limited coder capacity
- Balancing RADV with other priorities
- Other (please specify in comments)

6 Critical RADV Audit Readiness Tips

What Plans and Providers Should Be Doing Now

1 Develop a dedicated, skilled audit response team

- Assemble a multidisciplinary team trained in RADV
- Set clear processes for record retrieval, audit communication, and appeals

2 Strengthen provider engagement and training

- Provide ongoing clinician education and clear documentation guidelines, including attestations.
- Build strong contractual and collaborative provider relationships for efficient, accurate record capture

Lessons Learned



Define roles to reduce confusion, lag times, and missed deadlines.



Early engagement with providers builds trust and improves data quality.

6 Critical RADV Audit Readiness Tips

What Plans and Providers Should Be Doing Now



3 Optimize documentation and data integrity

- Use standardized materials and checklists aligned with RADV and HCC
- Confirm each diagnosis has complete, valid documentation

4 Institutionalize year-round audit readiness

- Move from 'audit event' to 'audit-ready always'.
- Regularly update and reconcile all risk adjustment data, ensuring corrections and deletes are completed ahead of CMS deadlines.

Lessons Learned

-  Standardized materials and training results in cleaner, audit-ready charts.
-  Treating audits as one-off events leads to rushed, error-prone responses.

6 Critical RADV Audit Readiness Tips

What Plans and Providers Should Be Doing Now



5 Leverage AI technology and analytics

- Deploy AI/NLP to automate chart reviews, code diagnoses, and flag high-risk areas
- Use analytics to prioritize high-risk records and optimize chart selection

6 Track performance metrics and continuously improve

- Track HCC validation and coding accuracy, target 95%+ to reduce exposure to extrapolated penalty
- Plan for faster audit cycles with 12-week response timelines

Lessons Learned

-  AI/NLP reduces review time, increases coding accuracy, and uncovers overlooked risk areas.
-  Tracking HCC validation rates reveals coding gaps and informs targeted provider training.

Polling Question

How are you preparing for the next round of RADV audits?

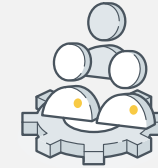
- Hiring additional internal coders
- Partnering with external coding/retrieval vendors
- Inventorying and reconciling medical records
- Increasing focus on prospective vs. retrospective reviews
- Updating provider contracts
- Other (please specify in comments)

Success Strategies: Partner and In-House



Vendor Partner Focus

- Record retrieval is key
- Ensure certified coders and QA protocols
- Leverage AI/NLP coding platform for greater efficiencies
- Define KPIs and report progress



In-House Focus

- Budget for FTEs and software tools
- Enhance collaboration with provider network for retrieval/EMR access
- Define escalation process
- Define and train medical record search process internally and externally
- Kindness and persistency is key

Prepare Now for Long-Term RADV Success



Make audit readiness a year-round, shared responsibility.



Proactively manage risk adjustment data and meet all plan year deadlines.



Leverage technology and analytics to detect unsupported diagnoses.



Prepare for larger samples, tighter timelines, and aggressive record requests.



Q&A



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Next Steps: PY 2020 Early Access

RADV Solution – Limited spots available!

- Audit readiness for PY 2020 requirements before the deadline
- Proven managed service with 99% accuracy track record
- 6-week rapid deployment from contract to project start

reveleer.com/radv-early-access

THANK YOU