



CENTER FOR BENEFICIARY CHOICES

MEMORANDUM

DATE: April 3, 2006

Memorandum to: All Part D Plan Sponsors

From: Abby Block, Director, Center for Beneficiary Choices

Subject: HPMS Call Center Performance Metric Comparison

Thank you for your participation in the Medicare prescription drug benefit. As the Administrator stated in his March 10, 2006 memo regarding CMS' expectations of Part D sponsors, this program continues to meet or exceed many of our expectations. CMS would like to demonstrate to our beneficiaries that we and our partners are continually raising the bar on the level of quality of service we are providing.

In promoting this vision on performance improvement, we are pleased to announce that Part D plan sponsors will now have the ability to view data on the performance of their customer service call centers and pharmacy help desk call centers. These data will be shown on a new module in HPMS titled "Call Center Performance Metrics," that will be accessible under the "Contract Management" section. Part D plan sponsors will be able to view information for their current contracts only on call center performance metrics including the average call time to reach a live person and the rate of call abandonment for customer service and pharmacy lines operated by the Part D plan sponsor. This report will be updated on a weekly basis and sponsors will have the ability to view reports from previous weeks. Technical notes are also provided on HPMS which describe the study's methodology. Data for this report are being provided to CMS by the Department of Health and Human Services Office of the Assistant Secretary for Planning and Evaluation (ASPE).

CMS believes that providing superior service to beneficiaries and to pharmacists is vital to the Part D program. Excellent performance in responding to inquiries and issues helps to ensure a high level of beneficiary satisfaction. Therefore, ensuring that Part D sponsors are meeting standards attested to in their 2006 applications, including having a call abandonment rate of 5% or less and having 80% of all calls answered within 30 seconds at the pharmacy help desk is a priority of CMS. The HPMS memo regarding Part D Call Center Requirements (dated February 23, 2006) further applied these requirements to the customer service call centers.

Plans that are successful in this area will provide sufficient access to trained customer service representatives in their call centers, and will take other steps necessary to meet their contractual requirements to provide timely and effective responses to inquiries from members, pharmacies, physicians, and other professionals. While these data are not being made available to the public immediately, we will in the coming days present these and other data about your plan's performance to the public.

While we seek your feedback on ways to improve the methodology for collecting and reporting these data, it is important that you examine your own Plan's performance and use these data to help identify areas for continued improvement.

Again, thank you for your participation in the Medicare prescription drug benefit. We have had many successes – and it is important we continue to improve upon them. If you have any questions or comments about the data please contact Christopher Powers at christopher.powers@cms.hhs.gov.