



## **CENTER FOR MEDICARE**

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**Date:** November 15, 2011 (replaces version from November 10, 2011)

**To:** All Medicare Advantage Organizations (MAO) and Prescription Drug Plan (PDP) Sponsors (Excluding Cost, PACE, and Employer Group/800 series plans)

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**Subject:** **CY 2012 Medicare Advantage and Prescription Drug Plan Readiness Assessment Request**

### **Background**

On September 16, 2011, CMS released the Contract Year 2012 Medicare Advantage and Part D Readiness Checklist, which summarized a selection of key operational requirements in existing and new statutes, regulations, manual chapters, Health Plan Management System (HPMS) memos, applications, and other advisory materials. CMS asked all organizations to review the Readiness Checklist carefully and take necessary measures to ensure that these key requirements are in place for CY 2012 open enrollment.

CMS is now asking organizations to respond back on their progress regarding preparations for 2012 using the 2012 Readiness Assessment (Attachment A), which includes items in the Readiness Checklist as well as additional guidance released this fall. **The 2012 Readiness Assessment must be completed *electronically* by Wednesday, November 23, 2011.**

### **Additions to the Assessment**

The Readiness Assessment generally mirrors the Checklist published in September, except that all items have been reframed into questions, rather than statements. We wish to highlight, however, that we have added two additional items to the current version:

- We are using the Readiness Assessment as the vehicle to monitor whether organizations whose plan service areas meet the 5% Limited English Proficiency (LEP) threshold have posted required translated marketing materials on their websites. Sponsors, as applicable, must provide the web URL for the translated evidence of coverage (EOC). (See page 6 of Attachment A).

- Sponsors need to report whether their organizations have executed Business Associate Agreements (BAA) with the Transaction Facilitator, Relay Health, for all Part D contracts. (See page 16 of Attachment A).

## **Instructions**

Each compliance officer should complete a single readiness assessment that represents the results of the readiness activities for all of the contracts within his/her purview. CMS uses the responses provided in the Readiness Assessment to monitor program operations and evaluate organizations' compliance with Medicare Part C and Part D requirements. As a reminder, organizations, not their subcontractors or other related entities, are responsible for the accuracy of their responses. CMS advises individuals authorized by their organizations to complete this assessment to take all steps necessary to confirm the accuracy of the information upon which responses are based prior to submitting the assessment to CMS.

For example, in Section E. Marketing, when responding to the marketing questions about the timeliness and accuracy of ANOC/EOC materials, CMS expects respondents to have proactively verified mailing dates with print vendors, ensured completeness of mail files with IT departments, and to have conducted pre and post mailing quality reviews of the accuracy of the materials, at a minimum. It would be insufficient to state that your materials were on-time simply because your organization did not receive complaints.

Additionally, specifically regarding 2012 ANOC/EOC material distribution, CMS will be reviewing timelines and accuracy. Please ensure that your organization has entered mail dates into HPMS and submitted errata sheets for all inaccuracies. CMS may be requesting additional information and will provide more detail within the next few months.

Compliance officers with more than one contract are to respond to each item in terms of all contracts' readiness status. Each item in the electronic version of the Readiness Assessment will be followed by radio buttons labeled "Yes" and "No," and certain items will have the options "Not Applicable" and/or fill-in-the-blank. Compliance officers should select the "Yes" radio button if all of their contracts are prepared to comply with the CMS guidance discussed in the item. Compliance officers should select the "No" radio button if one or more of their contracts are not yet prepared to comply with CMS guidance. There is text box below the "No" radio button that says, "If no, please explain and include your expected readiness date." In the text box, the compliance officer should provide the contract ID(s) that are not ready, and the expected readiness date for the particular item.

*Keep in mind, as respondents move through the assessment, questions will be presented based on responses to prior questions, and therefore not all respondents will be presented with all the questions as they appear in the attachment.*

In the event an organization later learns that a response to the Readiness Assessment was incorrect, the organization must immediately contact its CMS Account Manager to update the assessment and explain the reason for changing the response.

### **Accessing the Readiness Assessment**

Compliance officers must click on the link below (or copy and paste the link into your web browser) to complete and submit the assessment electronically to CMS:

<http://vovici.com/wsb.dll/s/11dc4g4d1d2>

Important: Both the UniqueID and E-Mail for accessing the assessment is the *compliance officer's email address* as listed in HPMS on 11/10/2011. The UniqueID and E-Mail are case sensitive.

CMS strongly recommends that compliance officers print responses to the assessment prior to moving to the next page. Once the last page is submitted, there is no opportunity to return to correct, update, or print original responses. However, if a compliance officer re-enters the Vovici program and resubmits a complete set of responses, CMS will use the latest submission up until the deadline as the official version.

If you need additional detail regarding items listed in the assessment, please refer to the CMS guidance provided in the checklist; otherwise, please contact Linda Anders at [Linda.Anders@cms.hhs.gov](mailto:Linda.Anders@cms.hhs.gov) or your CMS Account Manager.