



**MEDICARE PLAN PAYMENT GROUP  
OFFICE OF INFORMATION SERVICES**

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**DATE:** November 07, 2008

**TO:** All Medicare Advantage, Prescription Drug Plan, Cost, PACE, and Demonstration Organizations Systems Staff

**FROM:** Thomas Hutchinson /s/  
Director, Medicare Plan Payment Group  
Alan Constantian /s/  
Director, Information Services Design and Development Group

**SUBJECT: Enrollment and Payment Processing Information for the End of 2008 – ACTION**

The purpose of this memo is to provide Plans with a high-level view of the upcoming 2008 End of Year (EOY) processing activities with respect to Plan enrollments and payments. Please note that all information is approximate and subject to change depending on system resources and other factors. The dates are meant to be used as a guide. CMS will communicate any changes to the schedule that occur after this memo is published to Plans as needed.

Plans may also find similar information related to 2008 EOY activities in the memo entitled “Announcement of Fall Software Changes” from Alan Constantian, dated August 25, 2008.

The items outlined in this memo regarding the 2008 EOY processing schedule and activities are categorized into four major areas including General Information, Enrollment System User Interface (UI) Availability, Enrollment System Transaction Processing and Plan Reports. Appendix A – DPO Regional Assignments for Account Managers and Appendix B – MARx Monthly Processing Schedule are also attached.

**General Business Operations Information**

- A. MA and PDP NMEC and COB User Fees for 2009
- B. 2009 MARx Monthly Payment Processing Schedule
- C. Updating Systems Contact Information in HPMS

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- D. Enrollment Systems User Interface (UI) Availability

**Enrollment System Transaction Processing**

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- F. Submitting Transactions with January 1, 2009 Effective Dates
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**Appendix B – MARx Monthly Processing Schedule for 2009**

**General Information**

***11 A. THE MA AND PDP NMEC AND COB USER FEES FOR 2009***

The amount of the MA NMEC user fee to be collected in Fiscal Year (FY) 2009 is \$50.7 million. Beginning with the January 2009 payment, CMS will assess MA Plans an amount equal to 0.054% of each monthly prospective payment. This percentage is computed to spread the assessment of the \$50.7 million fee over the remaining nine months of the FY. If necessary, this percentage will be modified in the September 2009 payment deduction to ensure the full user fee amount is collected.

The amount of the PDP NMEC user fee to be collected in FY 2009 is \$18.1 million. Beginning with the January 2009 payment, CMS will assess PDP Plans an amount equal to 0.058% of each monthly prospective payment. This percentage is computed to spread the assessment of the \$18.1 million fee over the remaining nine months of the FY. If necessary, this percentage will be modified in September 2009 payment deduction to ensure the full user fee amount is collected.

The Part D COB user fee for FY 2009 is \$2.52 per member per year. CMS will assess the COB user fee at a rate of \$0.28 per Part D member each month from January – September 2009.

***12 B. 2009 MARX MONTHLY PAYMENT PROCESSING SCHEDULE***

Attached in Appendix B is the MARx Monthly Processing Schedule for 2009. This calendar provides the “Plan Data Due” dates for each month, the dates the Monthly reports will be available, as well as the days the MARx online will not be available. It also includes due dates for the required monthly enrollment/payment attestations. A description of the due dates is included with the schedule. Note the first payment for the year will be wired on January 2, 2009.

***13 C. UPDATING SYSTEMS CONTACT INFORMATION IN HPMS***

CMS is streamlining Plan notifications and information from MMA Help by transitioning some of these communications to the HPMS system. The individual named as the Plan “systems contact” in HPMS will receive these documents and messages. Plans are responsible for ensuring these communications are disseminated as necessary throughout their organizations. Therefore, it is vital that all Plans ensure that this contact information is current and accurate. Plans should review and update as necessary all contact information in HPMS as soon as possible.

**Enrollment System User Interface (UI) Availability**

***14 D. ENROLLMENT SYSTEM USER INTERFACE (UI) AVAILABILITY***

The Medicare Advantage and Part D Inquiry System (Common UI) will not be available for Plan access from approximately 6:00 am (ET) on Friday, November 7, 2008 until approximately 12:00 pm (ET) on Sunday, November 9, 2008 for regular December payment processing.

Due to end of year processing, CMS will place enrollment files into a “holding” state. Plans may send enrollment files to CMS following enrollment submission rules. However, these files will be held until software updates and 2009 configuration tasks are complete. CMS estimates that Plan transactions will begin to be processed in the order in which they were received in the system beginning on or about November 17, 2008. Plans can expect to begin receiving the Batch Completion Status Summary (BCSS) reports at that time. As a result, the Common UI will be mostly unavailable with possible intermittent Plan access during this time.

In summary, the Common UI will be unavailable intermittently during the following timeframes, as described in the narrative above.

- 6:00 am (ET) November 7, 2008 – 6:00 am (ET) November 17, 2008

#### Enrollment System Transaction Processing

#### ***15 E. PLAN ENROLLMENT SUBMISSION SCHEDULE***

CMS has established the following Plan data submission cutoff dates to allow for EOY processing activities. These dates are not different than the dates currently published in the Plan Communications User Guide (PCUG) found in Appendix C.

- December Payment Month – November 7, 2008
- January Payment Month – December 10, 2008
- February Payment Month – January 9, 2009

Plans are encouraged to submit transactions early and often to meet these payment deadlines.

#### ***16 F. SUBMITTING TRANSACTIONS WITH JANUARY 1, 2009 EFFECTIVE DATES***

Due to the timing associated with loading the HPMS file containing 2009 Plan data, transactions with effective dates of January 1, 2009 cannot be submitted until after the December 2008 payments are processed. Plans may begin to submit transactions for January 1, 2009 effective dates, such as certain SEP or IEP/ICEP requests, beginning on November 13, 2008. These transactions must be submitted using the correct application date (i.e., the receipt date or the appropriate date as directed in CMS guidance). Plans will not be considered out of compliance with the required submission timeframes for valid requests that must be held as directed above. Unsolicited AEP enrollment requests that Plans may have received prior to the start of the AEP on November 15, 2008 must be submitted on November 15, 2008 with 11/15/2008 as the application date on the transactions, as directed in CMS enrollment guidance.

#### ***17 G. SUBMISSION OF 2009 4RX DATA AND UPDATES TO PAYER SHEETS FOR 2009***

This section is directed to Part D sponsors advising them on the timing of 2009 enrollment transactions, communicates the expected availability of 2009 4Rx data in E1 eligibility queries for pharmacies and reminds Plan sponsors to update their payer sheets with their trading partners for any billing changes associated with their 2009 Part D benefits.

The Medicare Advantage–Prescription Drug (MARx) system will begin processing Plan-submitted 2009 enrollments for new enrollees, beneficiaries switching Plans, and Plan-generated rollovers on November 13, 2008. The 4Rx data for these types of enrollments will be available to support E1

eligibility queries from pharmacies starting on or around November 19 or 20, 2008.

Since Plan sponsors must submit 4Rx data for CMS-generated enrollments including CMS-mapped rollovers, auto-assigned and facilitated enrollments, and reassignments, CMS has scheduled the processing of these 2009 enrollment transactions to ensure 4Rx data are available timely.

- The initial processing of auto-assigned and facilitated enrollments with 2009 effective dates will be November 13, 2008; these transactions will be reported to sponsors on the transaction reply reports (TRRs) dated November 16, 2008. Part D sponsors must submit the 4Rx data for these beneficiaries within 48 to 72 hours. Therefore, the 4Rx data for these enrollments will be available for E1 eligibility queries no later than November 21, 2008. After this initial processing, CMS will begin daily processing of auto-assigned and facilitated enrollments with 2009 effective dates; these transactions will be reported to sponsors on the subsequent weekly/monthly TRR.
- Re-assignments generated by CMS also will be processed November 13, 2008; Plan sponsors will be receiving a special TRR on or about November 14, 2008 reporting these transactions. Plans must submit the 4Rx data within 48 to 72 hours of receipt of the special TRR. The 4Rx data for the CMS reassigned beneficiaries, therefore, should be available for E1 queries no later than November 19, 2008.

CMS also reminds Plan sponsors to replace 4Rx data for all beneficiaries whose 4Rx information is changing in any way between 2008 and 2009. Even if the CMS contract and PBP numbers remain the same, Plans are required to resubmit the beneficiary's 4Rx data to CMS on a Plan Change (72) transaction if there will be a change between 2008 and 2009 in any of the BIN, PCN, GROUP or MEMBER ID numbers. CMS will continue to monitor and publish the effectiveness of these processes through performance metrics related to pharmacy complaints and 4Rx completeness.

In addition to supporting the 4Rx data updating process, Part D Plan sponsors are reminded to update their payer sheets to reflect any billing changes associated with their 2009 Part D benefits, 2009 changes in Plan names, BIN/PCNs, or any other relevant billing information. These payer sheet changes should be communicated to all contracted pharmacies as soon as possible.

#### ***18 H. SUBMISSION OF PLAN ENROLLMENT TRANSACTIONS***

Plans may submit enrollments with December 2008 effective dates, as well as with January 2009 effective dates, in one file starting on Monday, November 10, 2008. Please see the "Election Period Processing" section below for important enrollment submission information. Plans do *not* have to split files by effective date year. As is customary, Plans may submit transactions for multiple contracts in one file.

#### ***19 I. PLAN CHANGE (72) TRANSACTIONS WITH 2009 EFFECTIVE DATES***

Plans are required to submit premium information as clarified below to CMS for their current members on a Plan Change (72) transaction by the cutoff date of January 9, 2009 and no earlier than November 15, 2008. CMS is unable to process any premium-related change requests with 2009 effective dates submitted before November 15, 2008, and these transactions will not produce any TRCs. Plans must resubmit any premium-related change requests with 2009 effective dates submitted before November 15, 2008 once the AEP begins on November 15, 2008. Please note that Plans are to use a PBP Change (71) transaction to submit this premium information if the member's PBP is also changing.

To reduce the number of such transactions to be processed, CMS will populate beneficiary records with 2009 premium information based on the bidding data in HPMS. MARx will perform this update for all active enrollees as well as those impacted by Plan rollovers via the HPMS Crosswalk.

If the premium information is changing for Plan member(s) and, therefore, the data in HPMS would not be applicable, Plans are advised to submit a Plan Change (72) transaction with the corrected premium information by the February payment submission cut-off date on Friday, January 9, 2008.

It is expected that MA Plans will need to submit Plan Change (72) transactions to update Part C premium information for beneficiaries who elected supplemental benefits and, thus, have a different premium for 2009.

**Important Note:** Plans are encouraged to submit new premium withholding requests and changes for existing enrollments that are effective January 1, 2009 by December 10, 2008. It is important for Plans to understand that, because these premium withholding requests must be submitted to SSA for processing, the resultant changes/updates will not actually be in effect on January 1, 2009. These transactions are expected to be processed by SSA within the 1st quarter of 2009 and will be applied as a retroactive change back to January 1, 2009.

## ***20 J. ELECTION PERIOD PROCESSING***

The annual election period (AEP) begins on November 15, 2008 and ends on December 31, 2008. Unsolicited beneficiary AEP paper enrollment applications received prior to the official start date of the AEP may be submitted beginning on November 15, 2008. As stated above, these transactions will be collected, held and then processed in the order in which they were received in the system to ensure accuracy of processing. Plans are encouraged to access the PDP Guidance or the MA Guidance, as appropriate, for specific policy on how to handle these requests.

PDPs may access Section 30 of the PDP Guidance at the following link:

<http://www.cms.hhs.gov/MedicarePresDrugEligEnrol/Downloads/2009PDPenrollmentguidance.pdf>

MA Plans may access Section 40 of the MA Guidance at the following link:

<http://www.cms.hhs.gov/MedicareMangCareEligEnrol/Downloads/2009MAenrollmentguidance.pdf>

CMS systems are not configured to process non-AEP elections with 2009 effective dates at this time. Plans that have received these enrollment applications may begin to submit them after the November 7, 2008 cutoff. As indicated above, these transactions will be held until all 2009 configuration tasks are complete (i.e. 2009 contracts and PBPs have been loaded to the system). If a Plan submits these transactions prior to the November 7, 2008 cutoff date, they will be rejected with either Transaction Reply Code (TRC) 003 (Invalid Contract Number) or TRC 107 (Rejected; Invalid or Missing PBP Number). The response will appear in the Failed Transaction Data File.

## ***21 K. TRANSACTION PROCESSING INFORMATION FOR PLANS NON-RENEWING FOR 2009***

Information related to retroactive adjustments and disenrollment transactions is described in this section.

### **1. Retroactive Payment Adjustments**

Non-renewed organizations are required to reimburse CMS for any overpayments. Conversely, a Plan will have the right to seek reimbursement from CMS for any previously identified underpayments. MA and PDP organizations seeking payment adjustments should report corrected information within 45 days from the date of receipt of the Plan's January payment Monthly reports (scheduled for December 23, 2008) to the Retroactive Adjustment Processing Contractor, IntegriGuard. The reporting of corrected information to IntegriGuard will trigger the CMS retroactive payment adjustment process. The reported corrections will be verified and applied to the Plan's member records. These corrections will be included as a part of the Plan's final payment reconciliation after the final risk adjustment reconciliation is completed for 2008.

CMS will complete final reconciliation of its accounts with Plans approximately nine months (or, if applicable, after the final risk adjustment reconciliation for 2008 is performed), after the end date of the Plan's contract, December 31, 2008. However, it is important to note that completion of final reconciliation may be delayed in the event a Plan fails to comply with their remaining risk adjustment data submission requirements. For MA and PDP organizations that are reducing service areas for contracts that will continue in 2009, no final reconciliation will be performed. Payment adjustments related to coverage provided in the discontinued portions of the service area will be included as part of the regular payment adjustment process and will appear in the Plan's monthly payments during 2009.

## **2. Disenrollment Transaction Processing**

For the most part, terminating organizations do not need to submit disenrollment transactions and beneficiaries do not need to request disenrollment except as described below. Non-renewing Plans are required to submit transactions for members that wish to disenroll prior to the non-renewal date, (i.e., effective December 1, 2008), according to the usual enrollment request processing requirements as provided in CMS Enrollment guidance. This must be accomplished while the Plan still has access to CMS systems so the disenrollments are processed.

When an MA organization reduces the service area of a CY 2008 MA Plan and the reduced service area is not continued in another MA Plan (i.e., contract-level SAR), the MA organization must submit disenrollment transactions to disenroll the beneficiaries from the Plan or Plans affected by the SAR. Beneficiaries are sent a termination notice and receive guaranteed issue Medigap rights. A final note is that the MARx monthly reports will no longer be available 61 days after a Plan terminates. Copies of MMRs created after that date will accompany a terminated organization's final reconciliation results from CMS.

All of a contract's user's access to CMS systems (MARx, MBD and BEQ) will end 60 days after the contract terminates.

## **3. Enrollment Transaction Processing**

To enroll in another Plan (or PBP), beneficiaries must complete an enrollment request. Beneficiaries who are members of a terminating or non-renewing Plan (PBP) are sent a termination notice and receive information about guaranteed issue Medigap rights. Prescription drug enrollees also receive a written description of options for obtaining prescription drug coverage in the service area.

## **22 L. ROLLOVER PROCESSING**

CMS has targeted the processing of Plan Rollovers and Terminations for the timeframe between

December 11 and December 12, 2008. During this time, CMS will disenroll all remaining members of terminating Plans (PBPs) effective 1/1/2009. CMS will also move members between Plans (PBPs) as specified by you on the HPMS Crosswalk. For this latter action, note that CMS can only process the following scenarios during rollover:

- Members in one 2008 PBP moving to a new 2009 PBP
- Members in multiple 2008 PBPs moving to one PBP for 2009

These transactions will appear on the Plan's Weekly TRR with TRC 146, effective date of 01/01/2009 and the value "D" in field 37 (Enrollment Source Code).

The scenario of members in one 2008 PBP moving to multiple 2009 PBPs cannot be accomplished under the CMS rollover process. Therefore, Plans that have been approved for such renewals must submit PBP Change (71) transactions on November 14, 2008 to move the members to the correct PBP effective 1/1/2009. This renewal scenario is the only acceptable reason for a Plan submitted rollover transaction. All Plans submitting transactions for this purpose must use the following specific data elements on each transaction:

- November 14, 2008 as the application date
- January 1, 2009 as the effective date
- "X" as the election type code (election period identifier).

Plans should carefully review the January MMRs to ensure that all of their members are in the correct PBP for January 2009. If they are not, contact the MMA Help Desk at 1-800-927-8069 or [mmahelp@cms.hhs.gov](mailto:mmahelp@cms.hhs.gov) to report the problem immediately. For those Plans that must submit PBP Change (71) transactions as permitted above, please ensure that you review the Batch Completion Status Summary report and the weekly Transaction Reply Report that follows the submission of these actions.

#### Plan Reports

#### ***23 M. PREMIUM ADJUSTMENTS AND THE FULL ENROLLMENT FILE***

The Full Enrollment File for the January payment month will be transmitted with the monthly report package on or about December 23, 2008. This file will provide Plans with premium information on all beneficiaries enrolled. If incorrect information is found on this file, Plans should submit a Plan Change (72) transaction with the corrected premium information. Any corrections should be submitted by the Plan submission cutoff date for the February payment month (6:00 pm (ET) January 9, 2009).

**Important Note:** During EOY processing, Plans should *not* submit Plan Change (72) transactions for the purpose of receiving responses with premium and low-income status information. As indicated above, premium and low-income status information will be provided to Plans via the Full Enrollment File.

#### ***24 N. UPDATE TO FALL SOFTWARE RELEASE LETTER – TRCS FOR PREMIUM WITHHOLD***

In the Fall Software release letter, Plans were notified that there would be a new Transaction Reply Code (TRC) 221 – Premium withhold option change rejected; retroactive effective date. Plans were told that if MARx received a withhold request containing a retroactive date that it would be rejected.

This is no longer the case. While Plans are strongly encouraged to promote prospective withholding to their members to minimize financial impacts to their social security checks, such requests will not be rejected.

### ***25 O. OCTOBER PDP NOTIFICATION FILES FOR REASSIGNMENT AND FOR AUTO/FACILITATED ENROLLMENT***

On Tuesday, October 14, 2008, CMS transmitted to certain Prescription Drug Plans (PDPs) the one-time files described in the HPMS memo, "Reassignment of LIS-Eligible PDP Members Effective January 1, 2009," dated August 29, 2008. These files provided a preliminary listing of LIS-eligible beneficiaries whom CMS will reassign to a new PDP effective January 1, 2009. Please refer to the October 15, 2008 memo from Alan Constantian titled "Updated - October PDP Notification Files for Reassignment and for Auto/Facilitated Enrollment" for additional information about these one-time files.

On or about Friday, November 14, 2008, CMS will transmit to certain Prescription Drug Plans (PDPs) a special MARx-generated Transaction Reply Report (TRR) containing the confirmed enrollments and disenrollments resulting from the reassignment process, as well as new auto/facilitated enrollments generated since November 1, but pended because they have a January 1, 2009 effective date.

**IMPORTANT:** Please do not submit the 4Rx records for the beneficiaries contained in the one-time files until after you receive the special MARx-generated Transaction Reply Report (TRR) on or about Friday, November 14, 2008, containing the confirmed enrollments resulting from the reassign process. This is because this preliminary list may not exactly match the list of beneficiaries who are ultimately enrolled in the Plan since voluntary Plan elections may occur after the preliminary file is created.

Please refer to the October 31, 2008 memo from Alan Constantian entitled "Special TRR for PDP Reassignments" for additional information regarding this Special TRR.

### ***26 P. LOSS OF LOW INCOME SUBSIDY DATA FILES***

CMS sends two Loss of Low Income Subsidy files to Part D Plans each fall. The first file was sent in September and identifies members who will no longer have the low income subsidy as of January 1, 2009. The second file will be sent in December and will be an updated version of the September file, indicating those beneficiaries who still no longer have the low income subsidy as of January 1, 2009.

The exact transmission date of this file is December 15, 2008 and will use the file naming conventions listed below; more information will be forthcoming to Part D Plans via an HPMS memo. For more information about this file transmission, please reference the August 25, 2008 memo from Alan Constantian titled "Updated - Announcement of Fall Software Release."

Gentran Mailbox

P.RXXXXX.EOYLOSD.Dyymmdd.Thhmsst.pn

Connect:Direct [Mainframe]

zzzzzzz.RXXXXX.EOYLOSD.Dyymmdd.Thhmsst

Connect:Direct [Non-mainframe]

[directory]RXXXXX.EOYLOSD.Dyymmdd.Thhmsst

## **27 Q. MONTHLY REPORTS**

As a result of EOY processing activities, Plans can expect to receive the standard monthly reports for the January payment month earlier than usual. The January payment month reports are expected to be transmitted on or about Monday, December 23, 2008. These January reports will reflect all changes implemented as part of the Fall Software Release.

Thank you in advance for your attention to all the items listed in this communication. Please take appropriate and timely action as necessary. If you have any questions about the information contained herein, please contact your Division of Payment Operations specialist assigned to the area where your Plan is located.

The MMA Help Desk is also available to assist you with any preparation activities or questions you may have. Please call the MMA Help Desk at 1-800-927-8069 or email to [mmahelp@cms.hhs.gov](mailto:mmahelp@cms.hhs.gov).

## Payment Specialist

Boston and New York	William Bucksten (410) 786-7477 <a href="mailto:William.Bucksten@cms.hhs.gov">William.Bucksten@cms.hhs.gov</a>
Philadelphia:	James Krall (410) 786-6999 <a href="mailto:James.Krall@cms.hhs.gov">James.Krall@cms.hhs.gov</a>
Atlanta:	Joanne Weller (410) 786-5111 <a href="mailto:Joanne.Weller@cms.hhs.gov">Joanne.Weller@cms.hhs.gov</a>
Chicago:	Janice Bailey (410) 786-7603 <a href="mailto:Janice.Bailey@cms.hhs.gov">Janice.Bailey@cms.hhs.gov</a> or Louise Matthews (410) 786-6903 <a href="mailto:Louise.Matthews@cms.hhs.gov">Louise.Matthews@cms.hhs.gov</a>
Dallas:	Joanne Weller (410) 786-5111 <a href="mailto:Joanne.Weller@cms.hhs.gov">Joanne.Weller@cms.hhs.gov</a>
Kansas City and Denver:	Terry Williams (410) 786-0705 <a href="mailto:Terry.Williams@cms.hhs.gov">Terry.Williams@cms.hhs.gov</a>
San Francisco:	Kim Miegel (410) 786-3311 <a href="mailto:Kim.Miegel@cms.hhs.gov">Kim.Miegel@cms.hhs.gov</a>
Seattle:	Mary Stojak (410) 786-6939 <a href="mailto:Mary.Stojak@cms.hhs.gov">Mary.Stojak@cms.hhs.gov</a>
PACE and And Demos	William Bucksten (410) 786-7477 <a href="mailto:William.Bucksten@cms.hhs.gov">William.Bucksten@cms.hhs.gov</a>

**MARx PLAN PAYMENT PROCESSING SCHEDULE DESCRIPTION**  
**Calendar Year 2009**

It is vital for everyone in your organization who is involved in the Medicare enrollment and payment operations of the contract, to be aware of the schedule of target dates attached to this description. The schedule includes:

- (1) **PLAN DATA DUE** -- This date is the last day on which you can transmit records to the CMS Data Center for processing in the month. **The transmission MUST BE completed by the close of business (6 PM) in the eastern time zone on the date noted.**
- (2) **MARx DOWN DAY** -- This is a day on which you can still access the Medicare Advantage Prescription Drug System (MARx) online, but CMS staff is unable to input any updates. Please note that on all work days, access can be gained unless a message on the MARx screen indicates otherwise. Also, be aware that the MARx System is not usually available on weekends. Hours of operation for MARx are 6 AM to 9 PM eastern time. You can submit batch transaction files on MARx down days and they will be processed.
- (3) **PAYMENT DUE PLANS** -- This is the date of the deposit of the CMS monthly payment to your plan; **all** deposits will be made to arrive on the first calendar day of the month unless the first day falls on a weekend or a federal holiday. In this case the deposit will arrive on the last workday prior to the first of the month.  

**Note:** The January deposit will always be the first business day of the month.
- (4) **MONTHLY REPORTS AVAIL** -- This is the date all the CMS monthly reports are available for downloading from your mailbox or received in your system. **NOTE:** No mailing is done for these reports, you **must** download them to receive them!
- (5) **MMR LIST FOR WORKING AGED/MSP SURVEY**– This Monthly Membership Roster (MMR) will be used to administer the **WORKING AGED/MSP** Survey due to CMS September 15 for calculation of the 2010 contract level payments.
- (6) **WA/MSP SURVEY RESULTS AND NON-RESPONDENTS LISTS**- This date is the last day on which you can submit the working aged Medicare Secondary Payer (MSP) members and nonrespondents to CMS. This data will be used to calculate the 2010 Contract level payment.
- (7) **ANNUAL ELECTION PERIOD BEGINS AND ENDS**- The Annual Election Period (AEP) occurs during November 15 and December 31 every year. Elections made during the AEP are effective January 1 of the following year.
- (8) **CERTIFICATION DUE**- This is the date by which the Certification to the accuracy of the enrollment information of the MARx Report is required. The Certification should be sent to IntegriGuard, Payment Validation Project, at IntegriGuard; MMC Enrollment Project; 2121 North 117<sup>th</sup> Avenue; Suite 200; Omaha, Nebraska 68164.
- (9) **APPROVED RETROS TO CMS**- Any records which will be processed as batch retroactive files must be in the hands of CMS by noon on the date shown along with the appropriate paperwork approved by CMS.

# YEAR 2009 PLAN MARx MONTHLY SCHEDULE

S	M	T	W	T	F	SA
<b>JANUARY</b>						
				1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	31

S	M	T	W	T	F	SA
<b>FEBRUARY</b>						
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28

S	M	T	W	T	F	SA
<b>MARCH</b>						
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30	31				

S	M	T	W	T	F	SA
<b>APRIL</b>						
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30		

S	M	T	W	T	F	SA
<b>MAY</b>						
						1
2						
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	30
31						

S	M	T	W	T	F	SA
<b>JUNE</b>						
	1	2	3	4	5	6
7	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29	30				

- JANUARY 2009**
- 1 New Year's Day (Holiday)
  - 2 JANUARY Payment Due Plan
  - 5 Certification of Enrollment for November 21, 2008 report
  - 7 Approved Retros to CMS (by noon)
  - 9 PLAN DATA DUE (6 pm Eastern Time)
  - 12 MARx DOWN DAY
  - 19 Martin Luther King, Jr. (Holiday)
  - 22 MONTHLY REPORTS AVAILABLE
  - 30 FEBRUARY Payment Due Plan

- FEBRUARY 2009**
- 4 Certification of Enrollment for December 23, 2008 report
  - 4 Approved Retros to CMS (by noon)
  - 6 PLAN DATA DUE (6pm Eastern Time)
  - 9 MARx DOWN DAY
  - 16 President's Birthday (Observed)
  - 20 MONTHLY REPORTS AVAILABLE
  - MMR List for Working Aged/MSP Survey 2010 Pmt.
  - 27 MARCH Payment Due Plan

- MARCH 2009**
- 11 Approved Retros to CMS (by noon)
  - 13 Certification of Enrollment for January 22, 2009 Report
  - 13 PLAN DATA DUE (6 pm Eastern Time)
  - 16 MARx DOWN DAY
  - 25 MONTHLY REPORTS AVAILABLE

- APRIL 2009**
- 1 APRIL Payment Due Plan
  - 8 Approved Retros to CMS (by noon)
  - 10 PLAN DATA DUE (6pm Eastern Time)
  - 13 Certification of Enrollment for February 23, 2009 report
  - 13 MARx DOWN DAY (Software Release)
  - 23 MONTHLY REPORTS AVAILABLE

- MAY 2009**
- 1 MAY Payment Due Plan
  - 6 Approved Retros to CMS (by noon)
  - 8 PLAN DATA DUE (6pm Eastern Time)
  - 11 MARx DOWN DAY
  - 15 Certification of Enrollment for March 25, 2009 report
  - 21 MONTHLY REPORTS AVAILABLE
  - 25 Memorial Day (Observed)

- JUNE 2009**
- 1 JUNE Payment Due Plan
  - 10 Approved Retros to CMS (by noon)
  - 12 PLAN DATA DUE (6pm Eastern Time)
  - 15 MARx DOWN DAY
  - 16 Certification of Enrollment for April 27, 2009 report
  - 24 MONTHLY REPORTS AVAILABLE

**MARx DOWN DAY – UI READ ONLY ACCESS**

S	M	T	W	T	F	SA
<b>JULY</b>						
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30	31	

S	M	T	W	T	F	SA
<b>AUGUST</b>						
						1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29
30	31					

S	M	T	W	T	F	SA
<b>SEPTEMBER</b>						
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30		

S	M	T	W	T	F	SA
<b>OCTOBER</b>						
				1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	31

S	M	T	W	T	F	SA
<b>NOVEMBER</b>						
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30					

S	M	T	W	T	F	SA
<b>DECEMBER</b>						
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30	31		

# YEAR 2009 PLAN MARx MONTHLY SCHEDULE

S	M	T	W	T	F	SA
<b>JANUARY</b>						
				1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	31

S	M	T	W	T	F	SA
<b>FEBRUARY</b>						
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28

S	M	T	W	T	F	SA
<b>MARCH</b>						
1	2	3	4	5	6	7
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15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30	31				

S	M	T	W	T	F	SA
<b>APRIL</b>						
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30		

S	M	T	W	T	F	SA
<b>MAY</b>						
					1	
2						
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	30
31						

S	M	T	W	T	F	SA
<b>JUNE</b>						
	1	2	3	4	5	6
7	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29	30				

## JULY 2009

- 1 JULY Payment Due Plan
- 3 Independence Day (Observed)
- 8 Approved Retros to CMS (by noon)
- 9 Certification of Enrollment for May 22, 2009 report
- 10 PLAN DATA DUE (6pm Eastern Time)
- 13 MARx DOWN DAY
- 24 MONTHLY REPORTS AVAILABLE
- 31 AUGUST Payment Due Plan

## AUGUST 2009

- 11 Approved Retros to CMS (by noon)
- 14 Certification of Enrollment for June 24, 2009 Report
- 14 PLAN DATA DUE (6pm Eastern Time)
- 14 MARx DOWN DAY
- 25 MONTHLY REPORTS AVAILABLE

## SEPTEMBER 2009

- 1 SEPTEMBER Payment Due Plan
- 7 Labor Day (Observed)
- 9 Approved Retros to CMS (by noon)
- 10 Certification of Enrollment for July 24, 2009 Report
- 11 PLAN DATA DUE (6pm Eastern Time)
- 14 MARx DOWN DAY
- 15 Working Aged/MSP Survey Results and Non-Respondent List Due (2010 Payment)
- 23 MONTHLY REPORTS AVAILABLE

## OCTOBER 2009

- 1 OCTOBER Payment Due Plan
- 7 Approved Retros to CMS (by noon)
- 9 PLAN DATA DUE (6pm Eastern Time)
- 12 Columbus Day (Observed)
- 12 MARx DOWN DAY
- 16 Certification of Enrollment for August 25, 2009 report
- 22 MONTHLY REPORTS AVAILABLE
- 30 NOVEMBER Payment Due Plan

## NOVEMBER 2009

- 10 Approved Retros to CMS (by noon)
- 11 Veteran's Day (Holiday)
- 13 PLAN DATA DUE (6 pm Eastern Time)
- 13 Certification of Enrollment for September 24, 2009 Report
- 15 Annual Election Period Begins
- 16 MARx DOWN DAY
- 24 MONTHLY REPORTS AVAILABLE
- 26 Thanksgiving Day (Holiday)

## DECEMBER 2009

- 1 DECEMBER Payment Due Plan
- 4 Certification of Enrollment for October 23, 2009 report
- 8 Approved Retros to CMS (by noon)
- 11 PLAN DATA DUE (6pm Eastern Time)
- 14 MARx DOWN DAY
- 22 MONTHLY REPORTS AVAILABLE
- 25 Christmas Day (Holiday)
- 31 Annual Election Period Ends
- January 4- JANUARY 2010 Payment Due Plan

**MARx DOWN DAY – UI READ ONLY ACCESS**

S	M	T	W	T	F	SA
<b>JULY</b>						
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S	M	T	W	T	F	SA
<b>AUGUST</b>						
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30	31					

S	M	T	W	T	F	SA
<b>SEPTEMBER</b>						
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S	M	T	W	T	F	SA
<b>OCTOBER</b>						
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31						

S	M	T	W	T	F	SA
<b>NOVEMBER</b>						
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29	30					

S	M	T	W	T	F	SA
<b>DECEMBER</b>						
			1	2	3	4
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