

APPENDIX IX – Organization Background and Structure

Instructions: Applicants must complete and upload in HPMS the following information.

A. Legal Entity Background

Date Legal Entity Established: _____

State of Incorporation

(Applicant must upload proof of incorporation, such as articles of incorporation or a certificate of good standing from the state of incorporation.)

B. Experience of Legal Entity

Date Organization, Its Parent Organization, or a Subsidiary of the Parent Organization Began Offering Health Insurance or Health Benefits Coverage _____

Date Organization, Its Parent Organization, or a Subsidiary of the Parent Organization Began Actively Managing Prescription Drug Benefits for an Organization that Offers Health Insurance or Health Benefits Coverage, Including:

- (a) Authorization, adjudication, and processing of prescription drug claims at the point of sale;
- (b) Administration and tracking of enrollees' drug benefits in real time, including automated coordination of benefits with other payers; and
- (c) Operation of an enrollee appeals and grievance process.

For New PDP applicants, Number of Covered Lives for Whom Organization Provided Health Insurance and/or Prescription Drug Coverage in 2021 and 2022:

C. Management of Legal Entity

Identify the staff (name and title) with legal authority to sign/enter into contracts on behalf of the legal entity

Identify all owners or members of the board of directors/trustees that were also owners or members of a board of directors/trustees of an organization that terminated or nonrenewed its Part C or Part D Contract since January 1, 2020.

D. Parent Organization Information

Name of Parent Organization

Date Parent Organization established

E. Organizational Charts (may be uploaded as separate documents)

Provide an organizational chart of the legal entity's parent organization, affiliates, subsidiaries and related entities.

Provide an organizational chart solely of the internal structure of the legal entity by department (e.g., marketing, compliance, pharmacy network/contracting, and claims adjudication). Do not provide the internal structure of the parent organization.

Provide a chart of the relationships between the applicant and its first tier, downstream, and related entities.

F, Proof of Incorporation

Upload proof of incorporation, such as articles of incorporation or a certificate of good standing from the state in which the applicant is organized.