

DEPARTMENT OF HEALTH & HUMAN SERVICES  
Centers for Medicare & Medicaid Services  
7500 Security Boulevard  
Baltimore, Maryland 21244-1850



**CENTER FOR BENEFICIARY CHOICES**

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**Date:** July 13, 2007

**To:** All Part D Plans  
Chief Executive Officers  
Chief Financial Officers  
Medicare Compliance Officers

**Subject:** Distribution of Part D Payment Reconciliation Reports

**From:** Thomas Hutchinson, Director  
Medicare Plan Payment Group

As part of the Part D Payment Reconciliation, CMS will distribute reports documenting reconciliation inputs and results to Part D Sponsors. These report formats have been distributed and described in detail on June 7, 2007 in a memorandum with the subject line "Payment Reconciliation System (PRS) Part D Payment Reconciliation Reports."

Part D Payment Reconciliation reports contain sensitive financial information. To ensure that reconciliation reports are distributed appropriately, CMS is building a web-enabled application that sponsor representatives will use to view and retrieve reports. In brief, each sponsor will designate an individual authorized to view and retrieve reports for the Sponsor's contracts. CSSC will establish a receiver ID and Password for the sponsor's designated user. This memorandum instructs each sponsor to complete the attached form and return it to the address below by July 23, 2007. CSSC will provide additional instructions to the designated authorized individual, in a separate letter containing the receiver ID and Password.

Attachment