

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



CENTER FOR BENEFICIARY CHOICES

MEMORANDUM

Date: May 14, 2007

To: All Current and Pending Part D Sponsors

From: Cynthia Tudor, Ph.D., Director, Medicare Drug Benefit Group

Subject: **Part D CY 2008 Transition Attestation**

A CMS-approved transition process is one of several required elements that must be in place for CMS to approve plan benefit packages for 2008. Simultaneous to the release of this memo, CMS sent an email from DrugBenefitImpl@cms.hhs.gov to compliance officers for every current and pending Part D contract (including PDPs, MA-PDs, Cost, Demo, PACE plans with formularies, and Employer-direct plans) containing a link to the CY 2008 Transition Attestation form. It is imperative that we receive a completed form for every current and pending contract number no later than **May 24, 2007**. If you do not submit the form, CMS will not renew or approve, as applicable, your 2008 contract.

Following instructions provided in the email, please click on the link in that email to complete and submit the attestations electronically. (Note – the earlier “survey authentication” error has been resolved; please try again if you encountered that problem.) Organizations offering and/or applying for multiple contract numbers must complete and electronically submit a separate form for each active or pending contract number. Renewing organizations do not need to submit their transition policy in narrative format unless subsequently requested by CMS.

We are aware that some organizations will not receive the email due to firewall constraints (for more information to enable you to receive these communications in the future, please contact Natassja Manzanero at natassja.manzanero@cms.hhs.gov). If your organization’s Compliance Officer did not receive the email notification, paste the following link into your web browser to access and complete the attestations:

<https://vovici.com/wsb.dll/s/11dc4g287b1>

Please note that your organization’s Unique ID for accessing the tool is your CMS contract number.

For questions about the transition process submission, please contact Denise von Rinteln at 410-786-0157 or by e-mail, denise.vonrinteln@cms.hhs.gov. Thank you.