

**Summary of HPMS Releases**  
For the week ending November 30, 2007

**Title: Updating CY 2008 Formularies**

**Date: 11/28/07**

**Summary:** This document outlines the operational details regarding December 2007 and January 2008 formulary enhancement windows for CY 2008 formularies and the process for submitting formulary updates throughout the 2008 contract year.

**Title: CMS Implementation of a standardized set of valid ICD-9 diagnosis codes relating to Payment Year 2009**

**Date: 11/28/07**

**Summary:** Reminds plans about updates to the list of diagnoses that CMS will use for calculating risk scores used in 2009 payment. Policy was announced in the 2008 Advance Notice and was delayed until 2009 in the 2008 Announcement (released April 2, 2007).

**Title: Reporting Estimated Rebates Applied to the Point-of-Sale Price: Operational Guidance**

**Date: 11/28/07**

**Summary:** This guidance gives technical guidance about PDE editing for the new PDE field Estimated Rebate at POS. The target date for system implementation is December 14, 2007. This new field is effective for Dates of Service on/after January 1.

**Title: Medicaid status for Part C and D risk adjustment and Part D cost sharing – implementation status for 2008 payment**

**Date: 11/28/07**

**Summary:** (1) Reminds plans about changes in source data and reporting for Medicaid status for Part C risk adjustment for payment year 2008; informs plans that additional information is expected to reduce their reporting (policy was announced in the 2008 Announcement, released April 2, 2007). (2) Informs plans of changes in where they are to report Medicaid status for LIS deeming purposes.

**Title: Information on PFFS marketing oversight**

**Date: 11/29/07**

**Summary:** This memo is a corrected version of the HPMS memo that was released on 10/31/2007 titled “Information on PFFS marketing oversight”.

**Title: RESEND - New Contract-Level Contacts in HPMS**

**Date: 11/30/07**

**Summary:** This memo outlines four new contract contacts in HPMS.

**Title: CMS 4124 FC Medicare Program; Revisions to the Medicare Advantage and Part D Prescription Drug Contract Determinations, Appeals, and Intermediate Sanctions Processes**

**Date: 11/30/07**

**Summary:** Today, the Centers for Medicare & Medicaid Services (CMS) put on public display at the Federal Register, regulation CMS-4124-FC – Medicare Program.