



CENTER FOR MEDICARE

DATE: September 4, 2020

TO: All Medicare Advantage Organizations, Prescription Drug Plans, and Section 1876 Cost Plans

FROM: Amy Larrick Chavez-Valdez, Director
Medicare Drug Benefit and C & D Data Group

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Medicare Drug & Health Plan Contract Administration Group

SUBJECT: Release of Contract Year 2021 Plan Correction Module

The Centers for Medicare & Medicaid Services (CMS) announces the release of the Health Plan Management System (HPMS) Plan Correction Module. This module allows organizations and sponsors to submit plan corrections for contract year (CY) 2021 Medicare Advantage and Prescription Drug Plan Benefit Packages (PBP). Please note that only contracts approved by CMS appear in the Plan Correction Module and are available for correction.

Please use the Bid Status History Report, which can be found using the following navigation path: HPMS Homepage > Plan Bids > Bid Reports > CY 2021 > Bid Status History Report, to review the status of your contract.

The Plan Correction Module opens on September 4, 2020 at 12:00 a.m. EDT and closes September 24, 2020 at 11:59 p.m. EDT. Only changes to the PBP that are supported by the Bid Pricing Tool (BPT) may be requested during the plan correction period. To access the module, users should follow this navigation path: HPMS Homepage > Plan Bids > Plan Corrections > Contract Year 2021.

Under 42 CFR §§ 422.254, 423.265(c)(3) and 423.505(k)(4), once an organization submits its final actuarial certification the organization is attesting that the organization's bid submission has been verified and is complete and accurate. Therefore, when an organization requests a plan correction, they are indicating that their final bid has inaccuracies and/or is incomplete. This calls into question an organization's ability to submit correct bids and suggests issues with the validity of the attestation and actuarial certification. As a consequence, organizations that submit plan corrections will be subject to compliance action and may be suppressed in Medicare Plan Finder until the issue(s) is corrected. Moreover, organizations that demonstrate a consistent pattern of bid submission errors over multiple contract years and/or previously received a compliance notice for CY 2020 may face more severe compliance action if the plan requests a plan correction for CY 2021.

Please see the contact list below for questions regarding the plan correction process.

Part C (MA plans):

Venita Scott at Venita.Scott@cms.hhs.gov or 410-786-3139

Part D (PDP and MA-PD plans):

PartDBenefits@cms.hhs.gov

Value-Based Insurance Design Model (VBID plans):

VBID@cms.hhs.gov

Part D Payment Modernization Model plans:

PartDPaymentModel@cms.hhs.gov