

Summary of HPMS Releases
For the week ending June 6, 2008

Title: Part D Appeals Requirements

Date: 5/29/08

Summary: The Medicare Modernization Act (MMA) established maximum timeframes for Part D Sponsors to make decisions on coverage determinations and redeterminations. If a Part D Sponsor fails to meet these timeframes, the Part D regulations require that the Sponsor automatically forward the request to the independent review entity (IRE) within 24 hours of the expiration of the decision timeframe. All Part D Sponsors are reminded of this regulatory requirement to ensure Medicare beneficiaries' right to a prompt review of their drug coverage requests.

Title: Q&A from PFFS Conference

Date: 5/29/08

Summary: This memo informs MA PFFS organizations that CMS has completed their responses to the questions that were submitted at the PFFS Conference and directs them to the CMS website for the Q&As.

Title: CY2008 Reporting Requirements Technical Specifications Document

Date: 5/29/08

Summary: This is to notify all Part D Sponsors that a Technical Specifications document for the CY2008 Reporting Requirements is available. This Technical Specifications document serves as a supplement to the 2008 Part D Plan Reporting Requirements document to clarify technical issues and provide additional definitions to ensure a common understanding of the data Sponsors are required to report. It does not change or add to the data collection described in the OMB-approved CY2008 Reporting Requirements document.

On the CMS website, this document will be posted at the same location of the 2008 Part D Reporting Requirements (CMS Home > Medicare > Prescription Drug Coverage Contracting > Plan Reporting and Oversight). This document will also be posted on the Part D Plan-reporting home page within HPMS.

Comments or questions should be sent via email to partd-planreporting@cms.hhs.gov and include "2008 Reporting Requirements Technical Specifications" in the subject line.

Title: Medicare Advantage Prescription Drug System (MARx) June 2008 Payment – INFORMATION

Date: 6/4/08

Summary: This letter provides information related to the June 2008 payment scheduled for May 30, 2008.

Title: CMS Audit Guides and Related Documents

Date: 6/4/08

Summary: This memo provides clarification about CMS policy for providing audit guides, checklists and other auditing tools for public view. Some audit guides currently available on HPMS and to the public contain cross-reference to internal audit procedures and testing tools not available to the public.

Title: Medicare Advantage Quality and Chronic Care Improvement Project Training

Date: 6/4/08

Summary: CMS will be providing a web-based training on QY08 Chronic Care Improvement Programs (CCIPs) and QY09 Quality Improvement Projects (QIPs) on June 18, 2008.

Title: More Frequent State File Submissions and Processing – REMINDER

Date: 6/5/08

Summary: The purpose of this memorandum is to remind Part D plans that CMS will begin accepting and processing multiple Medicare Modernization Act (MMA) State Files each month starting on or about June 15, 2008.

Title: New HPMS Data Extracts for Plans

Date: 6/6/08

Summary: This technical memo announces the release of data extracts that will become available to certain plan users, the types of data the extracts will contain, and the dates when the extracts will be released.

Title: CMS Reorganization Announcement

Date: 6/6/08

Summary: We are pleased to announce that effective June 8, 2008, the Center for Beneficiary Choices (CBC) has been reorganized and renamed as the Center for Drug and Health Plan Choice (CPC).