

HPMS E-Mail

Date: December 14, 2018

Subject: 2019 Medicare Parts C & D Reporting Requirements and Technical Specifications

The Centers for Medicare & Medicaid Services (CMS) is announcing the Office of Management and Budget (OMB) approval for the 2019 Parts C & D Reporting Requirements.

Specific Part C changes include the addition of new data elements to the Organization Determinations and Reconsiderations (ODR) reporting section to enable CMS to obtain more information about how often enrollees are submitting requests for claims and services and the outcome of plan decisions. The ODR timeliness requirement was deleted to be consistent with Part D reporting. The burden for Part C reporting was reduced by limiting Grievance reporting to totals only and suspending the Private Fee for Service (PFFS) Payment Dispute Resolution Process and Mid-Year Network Changes section. Additional clarification to Payment to Providers reporting was also provided through new Qs & As in Appendix 1 of the 2019 Part C Technical Specifications. Lastly, the Part D Retail, Home Infusion, and Long Term Care Pharmacy Access section was suspended.

The documents are posted at:

- 2019 Part C Reporting Requirements and Technical Specifications documents:
<https://www.cms.gov/Medicare/Health-Plans/HealthPlansGenInfo/ReportingRequirements.html>.
- 2019 Part D Reporting Requirements and Technical Specifications documents:
http://www.cms.gov/Medicare/Prescription-Drug-Coverage/PrescriptionDrugCovContra/RxContracting_ReportingOversight.html.
- HPMS Plan Reporting site.

Questions regarding the 2019 Part C Reporting Requirements should be sent via email to Partcplanreporting@cms.hhs.gov, and 2019 Part D Reporting Requirements questions sent to partd-planreporting@cms.hhs.gov. The email should include the title of the specific section and element to which your question applies in the subject line.

Thank You.