

HPMS Part D Pricing File Submission Module Pilot Guidance

Monday, June 10, 2019 – Friday, June 21, 2019

Beginning with Contract Year (CY) 2020, Part D sponsors will upload their drug pricing files, access validation results, and perform attestations using the new HPMS Part D Pricing File Submission module.

Important Notes for the Pilot

- This pilot is being administered on the HPMS production website: <https://hpms.cms.gov>
- The HPMS Part D Pricing Submission module uses the same record layouts as described in the current CY 2019 pricing guidelines. If desired, plans may choose to use their CY 2019 production files for the pilot submission in HPMS. **All pilot pricing data will be purged from HPMS.**
- If your submission does not complete processing within 4 hours of receipt, please contact the HPMS Help Desk at hpms@cms.hhs.gov or 1-800-220-2028.
- This module is being enhanced for its CY 2020 production release in July 2019, so plan users will see some differences at that time. Examples include:
 - The pilot module does **not** support multi-contract submissions. However, this new functionality will part of the CY 2020 production module.
 - Some errors that are “attestable and suppressible” in the pilot will become “non-attestable and suppressible” or “fatal” errors in the CY 2020 production module.
 - While limited to attesting to 50 items at one time in the pilot, plans will be able to attest to all items within an error type in the CY 2020 production module.
- When reviewing pilot validation results, please keep the following in mind:
 - A number of validations have been modified as compared to the current production process.
 - HPMS may be using reference data from a different time period when applying the pilot validations as compared to the current production process.
 - **Consequently, you should expect to encounter errors and findings in HPMS that are not identified as such in the current CY 2019 submission and validation process.**

Submitting Pilot Feedback

Please submit your feedback **by COB on Friday, June 21, 2019** at the following website:

<https://cmsgov.wufoo.com/forms/part-d-pricing-submission-module-pilot/>

Thank you for your participation in the Part D Pricing Submission module pilot. Your feedback will be invaluable as we continue working toward the CY 2020 production release.

Pilot Schedule

For this pilot, we are simulating a two-week submission period using the following schedule: ¹

June 2019						
Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
9	10	11	12	13	14	15
	Submission period begins at 6:00 a.m. ET. Plans submit pricing files to HPMS and receive validation results. Can resubmit continuously.	Plans submit pricing files to HPMS and receive validation results. Can resubmit continuously.	Plans submit pricing files to HPMS and receive validation results. Can resubmit continuously.	Plans submit pricing files to HPMS and receive validation results. Can resubmit continuously.	Plans submit pricing files to HPMS and receive validation results. Can resubmit continuously. Submission period ends at 8:00 p.m. ET.	HPMS runs outlier checks and notifies plans.
16	17	18	19	20	21	22
HPMS runs outlier checks and notifies plans.	Resubmission period begins at 6:00 a.m. ET. Eligible plans submit pricing files to HPMS and receive validation results. Can resubmit continuously.	Eligible plans submit pricing files to HPMS and receive validation results. Can resubmit continuously.	Eligible plans submit pricing files to HPMS and receive validation results. Can resubmit continuously. Submission period ends at 8:00 p.m. ET.	HPMS runs outlier checks and notifies plans.	Plan attestations due in HPMS by 5:00 p.m. ET.	

¹ This schedule applies **only** to the pilot process. The official CY 2020 calendar will be released with the annual pricing submission guidance.

Each user participating in the pilot must have:

- An active CMS user ID with the HPMS production job code assigned (HPMS_Prod_AWS);
- One or more active contract numbers assigned to the user ID in HPMS; and the
- Following HPMS accesstypes assigned to the user ID:
 - Part D Pricing Submission - Plan
 - Part D Pricing View/Reports - Plan

You may refer to the HPMS section on www.cms.gov for user ID guidance:

<https://www.cms.gov/Research-Statistics-Data-and-Systems/Computer-Data-and-Systems/HPMS/UserIDProcess.html>

Process Overview

There are some key differences between today's pricing file submission and validation process and the new process in HPMS. The high-level process steps are as follows:

1. The plan user initiates the submission of pricing files in the HPMS Part D Pricing Submission module.
2. On the upload page, HPMS performs the first level of validation in real-time:
 - a. Checks to ensure that the file: is zipped, is less than 150 MB in size, and uses the appropriate naming conventions. The plan user will not be able to upload the file if the submission fails one or more of these checks.
3. Once a submission passes the first level of validation and the file is successfully uploaded to HPMS, it will be queued up for the second level of validation.
 - a. The upload will be rejected automatically if the submission fails one or more of the following validations. These are considered fatal errors.
 - i. Zip file does not contain required files (i.e., pharmacy cost file/pricing file)
 - ii. Zip file contains other files/directories
 - iii. Zip file is encrypted
 - iv. Fails the virus scan
 - v. Header/footer records of pharmacy cost file/pricing file/ceiling price file are missing or do not match the format specified in the guidelines
 - vi. Record count specified in the header does not match the number of records in any of pharmacy cost file/pricing file/ceiling pricing files
 - vii. Record format in each of the pharmacy cost/pricing/ceiling price files does not match the format specified in the guidelines
 - viii. Pharmacy cost/pricing/ceiling price files contains incorrect contract number in any of the records in these files
 - ix. Pharmacy cost file has invalid plans or segments
 - x. Pharmacy cost file has missing plans or segments
 - b. Once the submission passes the fatal error checks, HPMS performs a set of comprehensive validations (i.e., today's Acumen validations excluding the high/low unit cost and high/low ceiling quantity outlier checks).

- c. The plan can access these validation results in HPMS once the second level of validation has been completed for a given submission.
4. After each weekly submission period ends, HPMS performs the third level of validation on the universe of plan submissions.
 - a. The third level of validation is comprised of the high/low unit cost and high/low ceiling quantity outlier checks.
 - b. The plan can access these validation results in HPMS once the outlier check job has completed processing.
5. The plan user will access views and reports and perform attestations, where applicable, in HPMS.
6. All plans may submit continuously during the initial submission window. At this time, only plans that submitted in the initial window and passed the fatal error checks may participate in the resubmission window in the second week. When eligible to submit in the resubmission window, plans may submit continuously.

Technical Guidance

The draft CY 2020 technical user guide is available in the module. Below are some highlights:

Dashboard Overview

When the plan user logs in to HPMS and accesses the Part D pricing file submission module, the user will land on the dashboard page. The dashboard has the following sections:

Description box: It provides user information about the initial and resubmission windows for the current submission period of the current contract year. It also provides the submission window information if the test submission period is open for the upcoming year.

Required actions widget: Shows the list of all contracts which are assigned to the plan user and have been submitted and need action (e.g., such as reviewing the findings, resubmission, or attestation to findings).

Submission overview widget: Shows the following for the current submission period: contracts submitted vs. the total number of contracts that need to be submitted; contracts that have findings that require action vs. the total number of contracts that are associated with the contract; and the list of contracts that are not yet submitted. These contracts will be listed as hyperlinks in the initial submission window and as plain text in the resubmission window, as the contracts which were not submitted in initial window cannot be submitted in the resubmission window.

Actions box: This box provides links to all of the pages of the Part D Pricing File Submission module to which the user has access.

Left navigation: This section provides links to all of the pages that comprise the Part D Pricing File Submission module to which the user has access.

File Submission

Plan users will have access to Pricing File Submission page (provided the submission access type is assigned) where they can submit the pricing files for contracts that are both eligible for submission and assigned to their user ID. Plan users can submit their pricing files any number of times as long as the submission window is open.

File Formats

Plans should prepare their pricing files according to the existing format as described in the current CY 2019 guidance memo sent on May 4, 2018 entitled, "Contract Year 2019 Pricing Data Requirements and Submission Calendar."

Estimated Processing Time

Pricing files are submitted to a queue following upload. Processing time varies and is based on the size of the file submitted and the number of files already within the queue awaiting validation. Plans will be notified if there are findings via email. Please note that some validations are performed after the submission window closes (e.g., high/low unit cost outlier).

If a file is not processed within 4 hours (i.e., remains in the data processing state), please contact the HPMS Help Desk at hpms@cms.hhs.gov or 1-800-220-2028.

Differences in Validations

CMS has modified a number of the file validations, so the results produced by HPMS may differ from the results received during the current CY 2019 process for the same files. For example, some findings that are attestable for CY 2019 are being changed to non-attestable or even fatal for CY 2020.

Plans are encouraged to review the validation findings carefully so that existing drug pricing file generation processes can be updated accordingly before CY 2020 submissions begin.

Reviewing Findings

Users will receive an email when a finding is identified in their submission. Users will need to login to HPMS and access the review/attest finding page to retrieve the detailed list of findings. Users can also attest to findings in HPMS that are eligible for attestation.

The entire list of findings in the submission can be downloaded on the review/attest findings page using the 'export csv' link on this page. If the submission window is still open, then the high/low unit cost and high/low ceiling quantity outliers will not yet be included in the .csv download.

Findings within each submission are grouped into four sections:

Fatal Errors

The pricing files failed to pass the basic checks, and the plan must resubmit within the initial window in order to be considered for Medicare Plan Finder (MPF) display.

Non-Attestable Findings

The pricing files must be corrected to address validation findings and then resubmitted during the initial window or resubmission window.

Attestable Findings

The pricing files may need to be resubmitted to address validation findings and then resubmitted during the initial window or resubmission window. Alternatively, plan users may attest to these findings. The attestation deadline is listed on the review/attest findings page.

Informational Findings

These findings are informational, and the plan user has the option to resubmit the pricing files.

Attesting to Findings

On the review/attest findings page, the plan user must expand the 'Attestable suppressible errors' and check the findings which need to be attested. After checking all the findings, the plan user should click on the 'Attest to Selected' button at the top right corner of the review/attest findings page.

The plan user will be able to attest to findings at any time during the submission period (after the finding is reported) up until the attestation deadline.

Reviewing the Past Findings

By default, the review/attest findings page displays the findings for the most recent pricing file submission for a given contract/contract year. Plan users that need to review past pricing file submission findings can do so on the findings detail page. On this page, the plan user must select the contract year, submission period, contract number, and version for which the findings need to be downloaded.

Email Communications

Plans are notified via email if findings are identified in the pricing file submission. High/low unit cost outlier or high/low ceiling quantity outlier findings are reported to plans in the following cases:

- Pricing files submitted by the plan have no other findings
- Pricing files submitted by the plan have informational findings

If the pricing file had 'fatal errors,' 'non-attestable suppressible findings,' or 'attestable suppressible findings,' HPMS sends an email as soon as the file is processed. Please note that HPMS will not send a separate email if the same pricing file with the above-mentioned errors also has high/low unit cost outliers or high/low ceiling quantity outliers. Rather, plans are advised to access the review/attest findings page after the resubmission window has opened to review the complete list of findings in their pricing file submission.

The complete list of validations and the details of each column will be populated in the .csv download.