



**Center for Medicare**

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**DATE:** January 22, 2019

**TO:** All Prescription Drug Plan Sponsors

**FROM:** Jerry Mulcahy, Director, Medicare Enrollment & Appeals Group

**SUBJECT:** Revised Notice of Denial of Medicare Part D Prescription Drug Coverage (CMS-10146)

The purpose of this memorandum is to announce the availability of the revised, OMB-approved standardized Notice of Denial of Medicare Part D Prescription Drug Coverage (CMS-10146).

As the new regulatory requirements reflected in the updated OMB-approved standardized Notice of Denial of Medicare Part D Prescription Drug Coverage are effective 1/1/19, please begin using this new notice as soon as possible but no later than 30 days from issuance of this HPMS memo. The revised notice must be provided to Part D enrollees when a plan issues a fully or partially adverse coverage determination.

The revised version of the Part D standardized denial notice has been modified to include:

- Updated language reflecting changes made in the 2019 Final Rule (CMS-4182-F) Lengthening Adjudication Timeframes for Part D Payment Redeterminations and IRE Reconsiderations (§§ 423.590 and 423.636). The adjudication timeframe for Part D standard redetermination requests for payment at § 423.590(b) and the related effectuation provision § 423.636(a)(2) includes language changing the timeframe for issuing decisions on payment redeterminations from 7 calendar days from the date the plan sponsor receives the request to 14 calendar days from the date the plan sponsor receives the request.

The notice and accompanying instructions are posted on the CMS Medicare Prescription Drug Appeals & Grievances webpage (under “Plan Sponsor Notices and Other Documents”):

<https://www.cms.gov/Medicare/Appeals-and-Grievances/MedPrescriptDrugApplGriev/PlanNoticesAndDocuments.html>

Please submit general questions regarding the Denial Notice to [PartD\\_Appeals@cms.hhs.gov](mailto:PartD_Appeals@cms.hhs.gov).