

Part D Drug Management Program

60-Day ICR Package

2023 Initial Notice	Initial Notice (new version)	Type of Change ¹	Reason for Change	Burden Change
Throughout notice	Corrected capitalization	Rev.	Accuracy	No
Doctors	Replaced with “prescribers”	Rev.	Accuracy	No
Active cancer-related pain	Removed “active” from “active cancer-related pain”	Del.	Proposed regulatory change	Yes
Member	Replaced with “enrollee”	Rev.	Accuracy	No
This form is not required when only medications are to be limited.	Replaced with “This form is not required for point-of-sale edits.”	Rev.	Accuracy	No

2023 Model Prescriber Inquiry Letter	Model Prescriber Inquiry Letter (new version)	Type of Change	Reason for Change	Burden Change
Active cancer-related pain	Removed “active” from “active cancer-related pain”	Del.	Proposed regulatory change	Yes

2023 Second Notice	Second Notice (new version)	Type of Change	Reason for Change	Burden Change
Throughout notice	Corrected capitalization	Rev.	Accuracy	No
Effective immediately	Added “and for one year from the date of this notice.”	Add.	Accuracy	No
Doctors	Replaced with “prescribers”	Rev.	Accuracy	No
https://www.medicare.gov/coverage/pain-management	Bolded text for consistency with other links	Rev.	Consistency	No
This form is not required when only medications are to be limited.	Replaced with “This form is not required for point-of-sale edits.”	Rev.	Accuracy	No

2023 Instructions	Instructions (new version)	Type of Change	Reason for Change	Burden Change
Heading	Updated assigned ICR number	Rev.	Accuracy	No

¹ Types of Change: Rev. = Revision, Del. = Deletion, Add. = Addition