

Summary of HPMS Releases  
*For the week ending July 7, 2006*

**Releases**

**Title: Analysis of Complaint Rates for Part D Sponsors (2)**

**Date:** June 30, 2006

**Summary:** Please see the attached memo and technical notes from Cynthia G. Tudor, Ph.D., Director, Medicare Drug Benefit Group, regarding complaint rates for Part D sponsors.

**Title: Resolution of Medicare Beneficiary Complaints**

**Date:** June 30, 2006

**Summary:** CMS has worked with Part D sponsors to significantly decrease the number of complaints, with special attention to “immediate sanction” cases. With enrollments after the initial May 15, 2006 open enrollment deadline and other issues ahead, CMS expects Part D sponsors to further improve their handling of immediate sanction complaints promptly.

**Title: Q&A – Insulin Syringes used in the LTC setting**

**Date:** July 5, 2006

**Summary:** The answer to Are Part D sponsors required to cover so-called “safety syringes”?

**Title: Part D Appeals Chapter Update**

**Date:** July 5, 2006

**Summary:** An updated version of chapter 18 of the Prescription Drug Benefit Manual on appeals will be posted this week. This HPMS transmission will alert PDPs to this updated document, as well as highlight the changes that have been made.

**Title: CRT-D Payment Clarification**

**Date:** July 6, 2006

**Summary:** In 2005, an NCD was issued regarding expanded Medicare coverage of Implantable Cardioverter Defibrillators (ICDs coded 37.94) to prevent sudden death in people with heart disease. Since this NCD met the significant cost threshold, CMS made payments on a fee-for-service basis for the ICD costs meeting the expanded coverage criteria for services provided on or after January 27, 2005 through December 31, 2005. Medicare Advantage Organizations (MAOs) were not liable for payment for costs

relating directly to the provision of services related to the ICDs until their payments were appropriately adjusted to take into account the cost of the NCD. The rates of the MAOs were appropriately adjusted effective January 1, 2006. This memorandum addresses the inquiry which has been raised regarding the payment responsibility for the CRT-D device (00.51) versus the AICD device (37.94) for which there is a national coverage determination.

**Title: Q&A Erectile Dysfunction**

**Date:** July 7, 2006

**Summary:** Answer to the question Are Erectile Dysfunction (ED) drugs covered under Part D?

**Title: LIS Incorrect Cost-Sharing**

**Date:** July 7, 2006

**Summary:** Answer to the question If a plan determines that a LIS-eligible enrollee was assessed a higher level of cost sharing than CMS confirms he or she is qualified for, how can it make the enrollee whole? What if the amount owed the enrollee is minimal?

**Title: LIS Incorrect Cost-Sharing**

**Date:** July 7, 2006

**Summary:** Answer to the question if a plan determines that an LIS-eligible enrollee was assessed a lower level of cost-sharing than CMS confirms he or she is qualified for, how can the plan recoup these amounts?