

Complaints Tracking Module (CTM)
Medicare PART D Frequently Asked Questions (FAQs)
January 10, 2007

- 1) **What is the CTM?**

The Complaints Tracking Module (CTM) is a module within the Health Plan Management System (HPMS). It is the Centers for Medicare and Medicaid Services' (CMS) central repository for complaints received from various CMS sources, including, but not limited to, 1-800-Medicare call centers and regional offices. Part D sponsors are required to resolve complaints in the CTM for which they will be held accountable on various complaint performance measures.
- 2) **What is the difference between CTM complaints and grievances?**

The difference is in how they are received. Grievances are received directly by the plan from the beneficiaries. Plans are required to report grievances to CMS through HPMS per the Part D Reporting Requirements. Conversely, CTM complaints are received by CMS (through 1-800-Medicare call centers, phone calls to the CMS regional offices, etc.) and then entered in the CTM for resolution by either the plan or by CMS. CMS does not require plans to report CTM complaints because CMS has direct access to the complaint data. It is recommended that plans track grievances separately from CTM complaints.
- 3) **How do I get access to the CTM?**

The Medicare Compliance Officer for the organization must submit a CTM Access Request Form to ctmaccess@cms.hhs.gov. The CTM Access Request Form is attached to this document.
- 4) **What is the turn around time for complaints resolution?**

For complaints flagged with an issue level of immediate action/need, plans are required to resolve them within two calendar days. Please contact your CMS regional office for turn around time for all other complaint issue levels.
- 5) **Which date does CMS use to measure performance and turn around time frames?**

CMS uses the contract assignment/reassignment date. This date is when the complaint is assigned to the contract. It is also known as the contract entry date in the plan download file.
- 6) **Do you have guidance for the plans on how to use the CTM?**

Yes, CMS posts the updated versions of the CTM Plan Standard Operating Procedures (SOP) on HPMS. It is recommended that all Plans review this document thoroughly and follow the procedures provided. Further information is provided in the User's Guide, which is available on the CTM Start Page as a link under Documentation.
- 7) **Who may I contact for specific issues and/ or questions?**

Submit your question(s) to the CTM mailbox at ctm@cms.hhs.gov. If your issue is regarding a specific CTM complaint, please include the complaint ID. If you have a technical problem using HPMS or the CTM, please contact the HPMS Help Desk at hpms@cms.hhs.gov. If you have a technical problem with the Gentran/Connect:Direct files that plans receive daily, please contact the MMA Help Desk at 1-800-927-8069 or mmahelp@cms.hhs.gov.