DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
Center for Beneficiary Choices
7500 Security Boulevard
Baltimore, Maryland 21244-1850

CMS/
CENTERS for MEDICARE & MEDICAID SERVICES

PLAN OVERSIGHT & ACCOUNTABILITY GROUP

DATE: May 25, 2007

TO: All Current and Prospective Medicare Advantage (MA), Prescription Drug Plan
                  (PDP), PACE, 1876 Cost Plan Sponsors and Demonstration Organizations

FROM: Cynthia E. Moreno, Director

SUBJECT: REMINDER - CY 2008 Bid Upload Requirements

The Health Plan Management System (HPMS) Contract Year (CY) 2008 Bid Upload
functionality was made available on May 18, 2007. Organizations should now begin completing
the upload requirements that accompany the physical upload of the bid submission. To access
the CY 2008 Bid Upload functionality, plan users should use the following navigation path in
HPMS: HPMS Homepage > Plan Bids > Bid Submission > Contract Year 2008 > Upload. As
has occurred in past years, if any of the required upload components are not completed by the
June 4, 2007 bid submission deadline, the bid submission will not be sent forward to the desk
review process.

The following is a complete listing of the 2008 upload requirements:
   ▪ Service Area Verification
   ▪ Plan Crosswalk
   ▪ Formulary Crosswalk
   ▪ Substantiation
   ▪ Two-Year Lookback Spreadsheet
   ▪ Attestation of Pricing Approach
   ▪ Bid Submission

Following the submission of your Bid, organizations are also required to submit the following:
   ▪ Actuarial Certification

The sections below describe each upload requirement in greater detail. Please pay special
attention to which organizations/plans are bound by each upload requirement because some
requirements are not mandatory for every organization/plan.

SERVICE AREA VERIFICATION

The Service Area Verification (SAV) functionality is an upload requirement for <u>ALL</u>
organizations to review their entire service area and applicable attributes (e.g. employer-
only/pending/partial counties or regions) and provide concurrence or non-concurrence.

Organizations that non-concur must provide an explanation as to what is incorrect with their contract service area, such as a county or region that is not listed or one that is erroneously listed. If an organization non-concurs with any portion of the contract service area, each noted discrepancy must be resolved with CMS as soon as possible. Service area issues may result in serious delays of the CMS bid desk review process. Once resolution is met with CMS, you must re-verify the contract service area and concur in HPMS as quickly as possible.

The SAV module lists the counties/regions assigned to a contract, whether it is an employer-only county/region, if it is a pending county/region, if it is a partial county, the number of individual plans that contain that county/region, and the number of employer plans that contain that county/region. If the Partial County displays a "Yes," you can select the "Yes" link to see the list of zip codes for that partial county. By selecting on the "Number of Individual Plans or Number of Employer Plans" link, you can see the plan ID(s) that have been contain that county/region.

If an organization identifies issues with its contract service area, including the presence of a county or region that should not be a part of its contract service area, please contact the appropriate person(s) as noted below:

MAO Service Area Issues:
− Lettica Ramsey at Lettica.Ramsey@cms.hhs.gov or 410-786-5262
− Ann Moses at Ann.Moses@cms.hhs.gov or 410-786-1167

PDP Service Area Issues:
− Marla Rothouse at Marla.Rothouse@cms.hhs.gov or 410-786-8063

Employer Group Service Area Issues:
− Jean Teetsell at Jean.Teetsell@cms.hhs.gov or 410-786-8643

Special Needs Plan (SNP) Service Area Issues:
− Marvin Glass at Marvin.Glass@cms.hhs.gov or 410-786-6845

PLAN CROSSWALK

ALL RETURNING ORGANIZATIONS (i.e. organizations that existed in CY 2007) must complete a plan crosswalk. Organizations will use this crosswalk to identify the relationships between their CY 2007 plans and CY 2008 plans. Please note that you will be required to complete the crosswalk for all Contract Numbers for which you own plans. CMS uses the plan crosswalk to identify whether plan enrollees need to be moved to another plan for the upcoming contract year due to a plan reconfiguration and to identify the beneficiary notification requirements.

Once all of the bids under a contract are approved, the Plan Crosswalk cannot be changed. The last version of the plan crosswalk present in HPMS at the time of the bid approval will become the official crosswalk. If any validation edits fail, you will need to correct the crosswalk or select a different type of plan relationship.

For information regarding system enrollment activities, enrollment procedures, and beneficiary notification, refer to the CY 2008 Call Letter available at: http://www.cms.hhs.gov/PrescriptionDrugCovContra/Downloads/CallLetter.pdf.

FORMULARY CROSSWALK

The Formulary Crosswalk is required for ALL CONTRACTS THAT SUBMITTED A FORMULARY to HPMS. In order for this requirement to be considered complete, all plans with Part D under the contract that submitted the formulary must be assigned a Formulary AND all Formularies submitted for an organization must be assigned to at least one plan. One Formulary may be mapped to one or more plans. Once a plan is approved, the Formulary Crosswalk for that plan cannot be changed.

After reviewing the Formulary Crosswalk Requirements associated with your CY 2008 plans, you are ready to complete the Formulary Crosswalk.

SUBSTANTIATION

For CY 2008, the BPT substantiation categories have been consolidated. Please refer to Appendix B of the MA BPT Instructions, Part D BPT Instructions and/or MSA BPT Instructions for details on which pieces of Substantiation the Office of the Actuary (OACT) is expecting as part of your Bid Submission. These documents are available by going to HPMS and selecting Plan Bids > Bid Submission > CY 2008 > Documentation.

Filenames should be in the following format: filename_date.ext. The filename size is limited to 50 characters. The substantiation upload file must be in one of the following formats: ZIP, TXT, DOC, XLS, JPG, GIF, and PDF. If the substantiation file is not in one of these formats, the submission will be rejected. You can upload individual files or .zip files. You can also upload multiple files for each type of substantiation. You are encouraged to limit the size of the substantiation files for performance considerations.

After a plan/segment bid has been approved, HPMS will not accept any substantiation for that plan/segment.

After reviewing the Pre-Upload Substantiation Requirements associated with your CY 2008 plans, you are ready to begin uploading your substantiation(s).

2-YEAR LOOKBACK SPREADSHEET

The Two-Year Lookback spreadsheet is an upload requirement for CERTAIN MA RENEWAL CONTRACTS. Organizations should confirm if the Two-Year Lookback spreadsheet upload is required for their organization by reviewing the Upload 2-Year Lookback status screen in the HPMS by going to Plan Bids > Bid Submission > Contract Year 2008 > Upload > 2-Year Lookback. If the contract number/name is listed in the grid, then a Two-Year Lookback spreadsheet is required.

This upload is at the Contract level and is separate from the Bid Submission. However, this upload needs to be completed before the Bids for this contract are considered for CMS review/approval.

Once all plans under the contract have been approved, a 2-Year Lookback spreadsheet for that contract can no longer be uploaded. After reviewing the 2-Year Lookback Spreadsheet Requirements associated with your CY 2008 plans, you are ready to begin uploading your 2-Year Lookback spreadsheet(s).

ATTESTATION OF PRICING APPROACH

The Attestation of Pricing Approach is an upload requirement for <u>CONTRACTS OFFERING PART D</u> with the exception of Employer/Union-only Group Waiver Plans. The Employer/ Union-only Group Waiver Plans may be required to complete a separate attestation at a later date.

For each CY 2008 Part D plan, organizations will indicate whether you contracted with a PBM and if so, what type of pricing approach was selected (i.e. pass-through or lock-in). These terms are defined in HPMS by following the navigation path: HPMS Homepage > Plan Bids > Bid Submission > Contract Year 2008 > Upload > Attestation of Pricing Approach.

BID SUBMISSION

The Bid Submission step is an upload requirement for <u>ALL </u>organizations/plans. Organizations are required to upload the completed Bid Submission, which is comprised of the applicable BPT(s) and PBP for each plan being submitted. Organizations should ensure that all patches have been applied to the BPT and PBP prior to upload.

Throughout the bid submission process, organizations should review the status of the various components of the Bid Submission Upload to ensure completion. This can be viewed by going to HPMS and selecting Plan Bids > Bid Submission > Contract Year 2008 > Upload > Review Upload Status.

After Bid Submission, you may be required to submit additional information to CMS. Please pay special attention to see if you are required to submit this additional material.

ACTUARIAL CERTIFICATION

An Actuarial Certification is required for each <u>SUBMITTED MA BPT, PART D BPT, AND MSA BPT</u>. For CY 2008, the certification process has been revised since previous years. Rather than uploading a certification document to HPMS, certifying actuaries must now complete a certification in HPMS after the Bids have been submitted. If the Actuarial Certification is not completed in HPMS, then the Bid will not be considered for CMS review/approval.

Please refer to Appendix A of the MA BPT Instructions, Part D BPT Instructions and/or MSA BPT Instructions for further requirements concerning the Actuarial Certifications. These

documents are available by going to HPMS and selecting Plan Bids > Bid Submission > CY 2008 > Documentation.

If you require technical assistance with the Bid Upload functionality, please contact the HPMS Help Desk at either 1-800-220-2028 or hpms@cms.hhs.gov. Thank you.